

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2019
OF THE CONDITION AND AFFAIRS OF THE

QualChoice Life and Health Insurance Company, Inc.

IAIC Group Code 01.		(Prior Period)				
Organized under the Laws of	,	Arkansas		_, State of Domicil	e or Port of Entry	Arkansas
Country of Domicile				United States		
censed as business type:	Dental Service Other []	& Health [X] e Corporation []			Health Maintenance C Is HMO Federally Qua	Pental Service or Indemnity [] Organization [] alified? Yes [] No [X] 04/25/1965
	10/			ceu business		
tatutory Home Office _		1 Allied Drive Sui (Street and Num		· · · · · · · · · · · · · · · · · · ·		AR, US 72202 Country and Zip Code)
lain Administrative Office	77	700 Forsyth Blvd	ibei)	Saint Louis	140 110 00405	044 705 4477
alli Administrative Office	(Street and Number)		(City or Town, Stat	te, Country and Zip Code)	(Area Code) (Telephone Numbe
lail Address		Forsyth Blvd		(5.1) 5	Saint Louis, MO,	US 63105
	(Street and	Number or P.O. Box)	:	,	(City or Town, State, Count	try and Zip Code)
rimary Location of Books and			svth Blvd	Saint L	ouis, MO, US 63105	
		(Street and			n, State, Country and Zip Code)	
iternet Web Site Address				www.qualchoice.d	com	
tatutory Statement Contact		Craig Alles		•	314-519-	-1232
tatatory etatement contact		(Name)			(Area Code) (Telephone	
	alles@centene	, ,			314-725-4658	
-	(E-Mail Address)				(FAX Number)	
			OFFICE	ERS		
Name		Title	0	Nam	Δ.	Title
John P. Ryan #				Thomas P.		Vice President
Jeffrey A. Schwaneke #	,	President Secretary		Tricia L. Dini		Vice President of Tax
Jeilley A. Juliwaliere #		Secretary		TIICIA L. DIIII	<u>\ciiiiaii #,</u> ,	VICE FIESIUEIII UI TAX
Keith H. Williamson #	,	Secretary	OTHER OF	FICERS		
·		Secretary	CTORS OR	R TRUSTEES	amson #	John P. Ryan #
Keith H. Williamson # Thomas P. Wise # State of	rkansas Pulaski being duly swo assets were the ed exhibits, sche the said reporting the NAIC Anithment of the NAIC Anithment of the NAIC Anithment of the NAIC Anithment of the NAIC exception of the NAIC except	Secretary DIREC Jeffrey A. Schwan ss rn, each depose and absolute property of tidules and explanation gentity as of the reputal Statement Instruction of the scope of this attended in the scope of the scope of this attended in the scope of the scope	say that they are the said reporting erost therein contains porting period state fuctions and Accounting not related station by the description of	the described officers ntity, free and clear freed, annexed or referred above, and of its in thing Practices and Practices also incertibed officers also incertibed officer	of said reporting entity, and any liens or claims there ed to, is a full and true state come and deductions there rocedures manual except the es and procedures, accordictly the related correspondents.	John P. Ryan # Ind that on the reporting period state eon, except as herein stated, and it tement of all the assets and liabilitie from for the period ended, and to the extent that: (1) state law reding to the best of their information of the information of t
Keith H. Williamson # Thomas P. Wise # State of A County of A Coun	Pulaski	Secretary DIREC Jeffrey A. Schwan ss rn, each depose and absolute property of tidules and explanation gentity as of the reputal Statement Instruction of the scope of this attended in the scope of the scope of this attended in the scope of the scope	say that they are the said reporting erost therein contains porting period state fuctions and Accounting not related station by the description of	the described officers ntity, free and clear freed, annexed or referred above, and of its in thing Practices and P to accounting practic ribed officers also indiffiling) of the enclose	of said reporting entity, and om any liens or claims there ed to, is a full and true stat come and deductions there rocedures manual except the sand procedures, accordudes the related correspond statement. The electronic	nd that on the reporting period sta eon, except as herein stated, and the tement of all the assets and liabilitie from for the period ended, and his to the extent that: (1) state law reding to the best of their information
Keith H. Williamson # Thomas P. Wise # State ofA County of ne officers of this reporting entity ove, all of the herein described a is statement, together with related of the condition and affairs of een completed in accordance wi effer; or, (2) that state rules or nowledge and belief, respectively hen required, that is an exact or egulators in lieu of or in addition to John P. Rya	Pulaski	Secretary DIREC Jeffrey A. Schwan ss rn, each depose and absolute property of tidules and explanation gentity as of the reputal Statement Instruction of the scope of this attended in the scope of the scope of this attended in the scope of the scope	say that they are the said reporting erns therein containe oorting period state actions and Accounting not related station by the descent of the said reporting for the said reporting	the described officers nitity, free and clear freed, annexed or referred above, and of its inting Practices and P to accounting practic filing) of the enclose liliamson ary	of said reporting entity, and of said reporting entity, and of many liens or claims there ed to, is a full and true stat come and deductions there rocedures manual except the estand procedures, accordudes the related correspond statement. The electronic	and that on the reporting period stateon, except as herein stated, and it tement of all the assets and liabilitiefrom for the period ended, and his to the extent that: (1) state law reding to the best of their information
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ASSETS

			Current Statement Date	9	4
		1	2	3	
				Net Admitted Assets	December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	1,552,427		1 ,552 ,427	24,322,108
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less				
	\$ encumbrances)			0	0
	4.2 Properties held for the production of income				
	(less \$ encumbrances)			 0	0
	4.3 Properties held for sale (less				
	\$ encumbrances)			0	0
5.	Cash (\$14,243,898),				
	cash equivalents (\$6,841,321)				
	and short-term investments (\$0)	i	i	1	
	Contract loans (including \$ premium notes)			0	0
	Derivatives			0	0
	Other invested assets			0	0
1	Receivables for securities				0
	Securities lending reinvested collateral assets.				0
11.	Aggregate write-ins for invested assets	0.007.040	0		0
ı	Subtotals, cash and invested assets (Lines 1 to 11)	22,637,646	J0	22,637,646	62,381,138
13.	Title plants less \$				
١	only).	i	1		
l	Investment income due and accrued	19,989		19,989	133,028
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of	725 206		735,206	472 222
	collection	735,200		735,200	412,232
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$earned				
	but unbilled premiums)earned			0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$			0	0
16	Reinsurance:				
10.	16.1 Amounts recoverable from reinsurers			0	63,542
	16.2 Funds held by or deposited with reinsured companies	1	i	i	0
	16.3 Other amounts receivable under reinsurance contracts				0
17.	Amounts receivable relating to uninsured plans				0
	Current federal and foreign income tax recoverable and interest thereon			1,666,338	
1	Net deferred tax asset			0	241,314
i	Guaranty funds receivable or on deposit		i	0	0
20.	Electronic data processing equipment and software		i	0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$)		<u> </u>	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates		ļ	0	0
23.	Receivables from parent, subsidiaries and affiliates	13,300,000		13,300,000	1,215,672
24.	Health care (\$1, 137, 570) and other amounts receivable	2,038,217	900,647	1,137,570	836,853
25.	Aggregate write-ins for other-than-invested assets	10 , 117 , 527	75,000	10,042,527	9,259,779
26.	Total assets excluding Separate Accounts, Segregated Accounts and				
	Protected Cell Accounts (Lines 12 to 25)	50,514,923	975,647	49,539,276	74,808,044
27.	From Separate Accounts, Segregated Accounts and Protected				
	Cell Accounts			0	0
28.	Total (Lines 26 and 27)	50,514,923	975,647	49,539,276	74,808,044
	DETAILS OF WRITE-INS				
1101.	Rounding.			0	0
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0		0	0
i	Insurance Charter	· · · · · · · · · · · · · · · · · · ·	75,000	0	0
i	CSR Cost Sharing Receivable	i ' '	0	8,970,036	9,259,779
i	State Income Tax Recoverable	1		1,072,491	0
1	Summary of remaining write-ins for Line 25 from overflow page		0	J0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	10,117,527	75,000	10,042,527	9,259,779

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, SAI		Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)	18,507,718		18,507,718	15,549,990
	Accrued medical incentive pool and bonus amounts			0	0
3.	Unpaid claims adjustment expenses	391,548		391,548	316,514
	Aggregate health policy reserves including the liability of				
	\$ for medical loss ratio rebate per the Public Health				
	Service Act	7 , 297 , 549		7 , 297 , 549	5,364,810
5.	Aggregate life policy reserves				0
	Property/casualty unearned premium reserve				0
I	Aggregate health claim reserves				0
	Premiums received in advance				
	General expenses due or accrued				
ı	Current federal and foreign income tax payable and interest thereon (including				
10.1	\$ on realized gains (losses))			0	1 051 583
10.2	Net deferred tax liability				0
	Ceded reinsurance premiums payable				
ı	Amounts withheld or retained for the account of others				03,033
	Remittances and items not allocated				_
l				U	0
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including			0	0
	\$ current)				
i	Amounts due to parent, subsidiaries and affiliates				
16.	Derivatives				0
	Payable for securities				0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized reinsurers				
	and \$ certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified (\$)				
	companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans				0
l	Aggregate write-ins for other liabilities (including \$				
	current)	0	0	0	0
24	Total liabilities (Lines 1 to 23)				
	Aggregate write-ins for special surplus funds				
l	Common capital stock				
ı	Preferred capital stock	XXX		1,500,000	′ ′
28.	Gross paid in and contributed surplus				
29.	Surplus notes				
30.	Aggregate write-ins for other-than-special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	(15,385,951)	(2,142,461)
32.	Less treasury stock, at cost:				
	32.1shares common (value included in Line 26				
	\$	XXX	XXX		0
	32.2shares preferred (value included in Line 27				
i	\$	xxx	xxx		0
i	Total capital and surplus (Lines 25 to 31 minus Line 32)			16,842,677	50,908,495
	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	49,539,273	74,808,040
<u>от.</u>		7000	7000	10,000,210	7 1,000,010
	DETAILS OF WRITE-INS				
2301.	Rounding	0		0	0
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page		0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	0	0	0	0
2501.	ACA Section 9010 Assessment	xxx	XXX	1,934,483	0
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	1,934,483	0
3001.				, ,	
3002.					i
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	xxx	xxx	0	0
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0
JU38.	Totalo (Littes 500 t tittough 5005 plus 5036) (Litte 30 8007e)	^^^	^^^	U	U

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENO				
		Current Yea	ar To Date	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1. N	Member Months				
	let premium income (including \$ non-health premium income)			1	
3. C	Change in unearned premium reserves and reserve for rate credits				
1	ee-for-service (net of \$medical expenses)				
	Risk revenue				
1	sggregate write-ins for other health care related revenues	I		1	
	ggregate write-ins for other non-health revenues				
8. T	otal revenues (Lines 2 to 7)	xxx	101,833,934	93,734,963	126 , 691 , 121
Hospital :	and Medical:				
	lospital/medical benefits	0	59.084.093	46.827.795	57 . 158 . 273
1	Other professional services			1	
1	outside referrals	i i		I	
	mergency room and out-of-area				
13. P	Prescription drugs		16 , 252 , 857	13,486,056	18,022,888
14. A	aggregate write-ins for other hospital and medical	0	0	0	0
	ncentive pool, withhold adjustments and bonus amounts				
16. S	Subtotal (Lines 9 to 15)	0	93 , 160 , 187	66,899,761	83,093,782
Less:					
17. N	let reinsurance recoveries		17,649	120,353	97 , 560
18. T	otal hospital and medical (Lines 16 minus 17)	0	93 , 142 , 538		82,996,222
19. N	Ion-health claims (net)			0	0
1	claims adjustment expenses, including \$ 2,222,783 cost containment expenses		3,955,864	4,229,609	4,430,870
1	General administrative expenses		16,319,989	11,713,132	15 , 884 , 109
	ncrease in reserves for life and accident and health contracts (including				,
\$	increase in reserves for life only)			0	0
23. T	otal underwriting deductions (Lines 18 through 22)				
24. N	let underwriting gain or (loss) (Lines 8 minus 23)	xxx	(11,584,457)	11,012,814	23,379,920
25. N	let investment income earned			606,061	
	let realized capital gains (losses) less capital gains tax of \$, ,	(111, 163)	, ,
27. N	let investment gains (losses) (Lines 25 plus 26)	0	543,209	494,898	817 , 134
1	let gain or (loss) from agents' or premium balances charged off [(amount recovered				
) (amount charged off \$)]			0	0
1		0	0	0	0
	let income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	I		1	
	ederal and foreign income taxes incurred	XXX	, ,	(2,760)	
32. N	let income (loss) (Lines 30 minus 31)	XXX	(10,314,271)	11,510,472	23,142,858
	DETAILS OF WRITE-INS	2007			
i		XXX			
0602		XXX			
	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	Ω
	otals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
	ommission on Life Product	XXX	19.021		23,498
0702	Sillin Solidi di Elio i Oddot	XXX	10,021	0	0
0703		xxx			
0798. S	Summary of remaining write-ins for Line 7 from overflow page	xxx	0	0	0
	otals (Lines 0701 through 0703 plus 0798) (Line 7 above)	xxx	19,021	19,163	23,498
1402					
1403				ļ	
1498. S	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. T	otals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901. r	ound i ng			0	0
2902 . 0.				0	0
2903				ļ	
	Summary of remaining write-ins for Line 29 from overflow page	I	0	0	0
2999. T	otals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	CICKIOCO (Continue	u)
		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
	CAPITAL & SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	50,908,493	27 ,620 ,834	27 ,620 ,834
34.	Net income or (loss) from Line 32	(10,314,271)	11,510,472	23 , 142 , 858
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$		0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax	(266,972)	0	238,095
39.	Change in nonadmitted assets	(9,882)	40,049	(93,294)
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	(5,000,000)	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in	13,300,000	0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders	(31,056,811)	0	0
47.	Aggregate write-ins for gains or (losses) in surplus	(717,880)	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	(34,065,816)	11,550,521	23,287,659
49.	Capital and surplus end of reporting period (Line 33 plus 48)	16,842,677	39,171,355	50,908,493
	DETAILS OF WRITE-INS			
4701.	rounding	2	0	0
4702.	Change in Surplus.	(513,396)	0	0
4703.	Tax Receivable Adjustment at Sale of Company	(204,486)		
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	(717,880)	0	0

CASH FLOW

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations	10 Bate	10 Bato	December of
1.	Premiums collected net of reinsurance.	103,381,080	99.901.202	126 , 133 , 748
			554,282	921.714
	Miscellaneous income	19,021	(436,765)	23,498
	Total (Lines 1 to 3)	104.091.931	100.018.719	127.078.960
	Benefit and loss related payments	- / /	63,344,394	79 , 138 , 862
	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0,100,002
	Commissions, expenses paid and aggregate write-ins for deductions		21,273,330	25,848,320
	Dividends paid to policyholders		0	
	Federal and foreign income taxes paid (recovered) net of \$			
٠.	gains (losses)	1,786,458	2.513.259	(561,838
10	Total (Lines 5 through 9)	107.843.030	87,130,983	104,425,344
	Net cash from operations (Line 4 minus Line 10)	(3,751,099)	12.887.736	22,653,616
	Cash from Investments	(0,701,000)	12,007,700	22,000,010
12	Proceeds from investments sold, matured or repaid:			
12.		24,634,203	10,846,008	12,869,943
	12.2 Stocks		0	12,000,040
		0	0	(
		0	٥	
	12.5 Other invested assets	0	Λ	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		0	
	12.7 Miscellaneous proceeds	100,000	0	
			10.846.008	12,869,943
12	Cost of investments acquired (long-term only):	24,734,203	10,040,000	12,000,040
13.	13.1 Bonds	1 808 558	13,312,042	17 258 5/6
	13.2 Stocks		0	17 ,230 ,340
		0		
	13.4 Real estate	0	0	
	13.5 Other invested assets		0	(
	13.6 Miscellaneous applications	1,546	0	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	1,900,104	13,312,042	17,258,546
11	, ,	1,300,104	0	17,200,040
	Net increase (or decrease) in contract loans and premium notes	22,834,099	(2,466,034)	(4,388,603
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	22,034,099	(2,400,034)	(4,300,003
40	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):	/F 000 000\	0	,
	16.1 Surplus notes, capital notes		0	ال
	16.2 Capital and paid in surplus, less treasury stock			ا
		0	0	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
			0 (129,320)	(11,400,280
17	16.6 Other cash provided (applied)	U	(129,320)	(11,400,200
17.	plus Line 16.6)	(36,056,811)	(129,320)	(11,400,280
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	,,,		
	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(16 , 973 , 811)	10,292,382	6 , 864 , 733
19.	Cash, cash equivalents and short-term investments:	06		<u> </u>
		′ ′ ′	31,194,297	, ,
	19.2 End of period (Line 18 plus Line 19.1)	21,085,219	41,486,679	38,059,030

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STATEMENT AS OF SEPTEMBER 30, 2019 OF THE QualChoice Life and Health Insurance Company, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Comp (Hospital	Compreh (Hospital &	nensive Medical)	4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	27,756	15,850	8,336	2,588	0	0	0	0	0	982
2. First Quarter	29,903	16,453	9,985	2,509	0	0	0	0	0	956
3. Second Quarter	31,198	18,434	10,232	2,532	0	0	0	0	0	0
4. Third Quarter	35,011	20,686	10,786	2,537						1,002
5. Current Year	0									
6. Current Year Member Months	284,948	162,425	91,013	22,785						8,725
Total Member Ambulatory Encounters for Period:										
7. Physician	71,478	43,509	19,053	8,916						
8. Non-Physician	70,052	30,622	34,666	4,764						
9. Total	141,530	74,131	53,719	13,680	0	0	0	0	0	0
10. Hospital Patient Days Incurred	14,062	9,073	1,496	3,493						
11. Number of Inpatient Admissions	2,622	1,740	417	465						
12. Health Premiums Written (a)	101,288,320	66,752,841	29,861,691	3,814,493						859,295
13. Life Premiums Direct	883,077		883,077							
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	102,170,663	66,752,841	30 , 744 , 034	3,814,493						859,295
16. Property/Casualty Premiums Earned	ļ0 ļ.									
17. Amount Paid for Provision of Health Care Services	99,242,641	74,836,242	19,422,543	3,288,426						1 ,695 ,430
18. Amount Incurred for Provision of Health Care Services	93,160,186	60,561,955	27,935,552	3,317,128						1,345,551

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims unpaid (Reported)		, , , , ,				
0199999 Individually listed claims unpaid.		0	0	0	0	0
0299999 Aggregate accounts not individually listed-uncovered	45,969	11,788	5,728	2,608	6.077	72,170
0299999 Aggregate accounts not individually listed-uncovered	380,555	97,591	47,417	21,593	50,311	597,467
0499999 Subtotals	426,523	109,379	53,144	24,201	56,389	669,637
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	17,838,082
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	0
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	18,507,718
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	0

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

ANAL 1919 OF CLAIMS UNPAID-PRIOR	Cla	ims	Liab			
		r to Date	End of Curr		5	6
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
Comprehensive (hospital and medical)	13,069,699	76,314,407	346,619	17 , 271 , 548	13,416,318	14,599,436
2. Medicare Supplement	506,681	2,781,745	2,126	498,934	508,807	562,062
3. Dental only					0	0
4. Vision only					0	0
Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare					0	0
7. Title XIX - Medicaid					0	0
8. Other health	318,514	1,376,916	3,800	384,691	322,314	388,491
9. Health subtotal (Lines 1 to 8)	13,894,894	80,473,068	352,545	18 , 155 , 173	14,247,439	15,549,989
10. Health care receivables (a)	845,916	3,070,063		1,137,570	845,916	870,396
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts					0	0
13. Totals (Lines 9-10+11+12)	13,048,978	77,403,005	352,545	17,017,603	13,401,523	14,679,593

⁽a) Excludes \$ loans or advances to providers not yet expensed.

1. Summary of Significant Accounting Policies

A) Accounting Practices

The financial statements of QualChoice Life and Health Insurance Company, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the Arkansas Department of Insurance (DOI).

The Arkansas DOI recognizes only statutory accounting practices prescribed or permitted by the State of Arkansas for determining and reporting the financial condition and results of operations of an insurance company, for determining solvency under the Arkansas Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (NAIC SAP) has been adopted with modifications as a component of prescribed or permitted practices of the state of Arkansas.

NET INCOME	SSAP#	F/S Page	F/S Line #	State of Domicile	 2019	 2018
QualChoice Life & Health Insurance Company, Inc. state basis (Page 4, Line 32, (1) Columns 2 & 4)	XXX	XXX	XXX	Arkansas	\$ (10,314,271)	\$ 16,714,432
(2) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets			<u>-</u>	Arkansas	\$ <u>-</u> _	\$ <u>-</u>
(3) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Depreciation of fixed assets, home office property			<u>-</u>	Arkansas	\$ 	\$
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	Arkansas	\$ (10,314,271)	\$ 16,714,432
SURPLUS						
QualChoice Life & Health Insurance Company, Inc. state basis (Page 3, Line 33, (5) Columns 3 & 4)	XXX	XXX	xxx	Arkansas	\$ 16,842,677	\$ 59,972,190
(6) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g., Goodwill, net e.g., Fixed Assets, net			_	Arkansas	\$ <u>-</u>	\$
(7) State Permitted Practices that increase/(decrease) NAIC SAP: e.g., Home Office Property			-	Arkansas	\$ <u>-</u>	\$
(8) NAIC SAP (5-6-7=8)	XXX	XXX	xxx _	Arkansas	\$ 16,842,677	\$ 59,972,190

B) Use of Estimates in the Preparation of the Financial Statement

No change

- Cash and short-term investments are carried at cost, which approximates fair value. Short-term investments include securities purchased within twelve month or less of maturity date.
- 2. Investment grade bonds (NAIC designation 1 or 2) not backed by other loans are valued at amortized cost using the scientific (constant yield) method. Bonds containing call provisions, except "make whole" call provisions, are amortized to the call or maturity value/date which produces the lowest asset value (yield to worst). Bonds which are below investment grade (NAIC designations 3 to 6) are carried at the lower of amortized cost or fair value.
- 3. The Company holds no common stocks.
- 4. The Company holds no preferred stocks.
- 5. The Company holds no mortgage loans.
- 6. The Company holds no loan-back securities.
- 7. The Company has no investments in subsidiaries, controlled or affiliated companies.
- 8. The Company has no investments in joint ventures, partnerships and limited liability companies.
- 9. The Company holds no derivatives.
- 10. The Company reviews expectations regarding the profitability of contracts in force to determine whether a premium deficiency reserve is required. The Company considers anticipated investment income when calculating its premium deficiency reserves. The adequacy of reserve requirements is continually reviewed by management, with any reductions in the reserve being recorded as a beneficial effect in the Statement of Revenue and Expenses.
- 11. Unpaid losses and loss adjustment expenses include amounts determined from claims estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount to be adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
- 12. There were no changes to the capitalization policy.
- 13. Pharmaceutical rebates are based on actual pharmaceutical claims experience.

- 14. Premiums are generally received in the month for which coverage applies, and income from such premiums is recorded as earned during the period in which the Company is obligated to provide services to members. Premiums collected in advance of the month for which coverage applies are deferred and recorded as unearned premium revenue.
- 15. The Company recognizes investment income when earned. The Company records receivables for investment income earned as of the reporting date but not paid to the Company until subsequent to the reporting date. The Company performs an evaluation of the receivables to determine whether impairment exists.

C) Going Concern

The Company's management has not identified any conditions or events that raise substantial doubt in its ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company has no material changes in accounting and/or correction of errors.

3. Business Combinations and Goodwill

- A. Statutory Purchase Method None
- B. Statutory Merger None
- C. Assumption Reinsurance None
- D. Impairment Loss None

4. Discontinued Operations

None

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans None
- B. Debt Restructuring None
- C. Reverse Mortgages None
- D. Loan-Backed Securities None
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale Not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Not applicable
- J. Real Estate Not applicable
- K. Low-Income Housing Tax Credits (LIHTC) Not applicable
- L. Restricted Assets

	1	2	3	4	5	6
Restricted Asset Category	Total Gross Restricted from Current Year	Total Gross Restricted From Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Percentage Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown						
b. Collateral held under security lending agreements c. Subject to repurchase agreements						
d. Subject to reverse repurchase agreements						
e. Subject to dollar repurchase agreements						
f. Subject to dollar reverse repurchase agreements						
g. Placed under option contracts h. Letter stock or securities restricted as to sale - excluding FHLB capital stock						
i. FHLB capital stock j. On deposit with states	1,688,307	1,605,373	82,934	1,688,307	3.3%	3.4%
k. On deposit with other regulatory bodies	1,000,507	1,003,373	02,734	1,000,507	3.370	3.470
Pledged as collateral to FHLB (including assets backing funding agreements).						
m. Pledged as collateral not captured in other categories						
n. Other restricted assets o. Total Restricted Assets	1,688,307	1,605,373	82,934	1,688,307	3.3%	3.4%

- 1. Restricted Assets (Including Pledged)
- 2. Detail of Assets Pledged as Collateral Not Captured in Other Categories None
- 3. Detail of Other Restricted Assets None
- 4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements None
- M. Working Capital Finance Investments None
- N. Offsetting and Netting of Assets and Liabilities None
- O. Structured Notes None
- P. 5GI Securities None
- Q. Short Sales- None
- R. Prepayment Penalty and Acceleration Fees Not applicable

6. Joint Ventures, Partnerships and Limited Liability Companies

The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies.

7. Investment Income

- 1. All investment income due and accrued with amounts that are over 90 days past due was excluded from surplus.
- 2. The total amount excluded was \$0.

8. Derivative Instruments

None

9. Income Taxes

No significant change

10. Information Concerning Parent, Subsidiaries and Affiliates

A, B, C, G. Effective 4/1/19, the Company is a wholly-owned subsidiary of Centene Corporation.

Centene Management Company, LLC, a wholly owned subsidiary of Centene Corporation, provides data, claims processing, case management, care coordination and general management services to the Company. Medical and administrative expenses included \$2,861,584 for such services during the period ended September 30, 2019.

D. Included in the Company's balance sheet as of September 30, 2019 are the following receivables from and payables to parent, subsidiaries and affiliates:

Affiliated Entity	2019 Receivable	2019 Payable
Centene Management Company	-	(3,985,454)
Centene Center LLC	-	(5,595)
Centene Corporation	13,300,000	-

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- F. Not Applicable
- H. Not Applicable.
- I. Not Applicable.
- J. Not Applicable.
- K. Not Applicable.
- L. Not Applicable.
- M. Not Applicable.
- N. Not Applicable.

11. Debt

- A. Capital Notes None
- B. FHLB Agreements None

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company has an employee 401(k) plan covering all full-time employees of the Company who have completed three months of employment and choose to participate. The benefit plan has not changed since the year ended 12/31/18.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

A-M. No change

14. Liabilities, contingencies, and assessments

A.-F. No significant change

15. Leases

None

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No change

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities No change

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans None

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators No change

Fair Value Measurement

A. Assets Measured at Fair Value on a Recurring Basis

Assets and liabilities recorded at fair value in the statutory statement of admitted assets, liabilities and capital and surplus are categorized based upon the extent to which the fair value estimates are based upon observable or unobservable inputs.

Level inputs are as follows:

Level input	Input definition
Level I	Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
Level II	Inputs other than quoted prices included in Level I that are observable for the asset or liability through corroboration with market data at the measurement date.
Level III	Unobservable inputs that reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

The following table summarizes fair value measurements by level at September 30, 2019 for assets and liabilities measured at fair value on a recurring basis.

Description for each class of asset or liability	(Level 1)	(Le	vel 2)	(Le	(Level 3)		Asset (NAV)	 Total
a. Assets at fair value								
Cash, Short Term Investments and Cash Equivalents	\$ 21,085,219	\$	-	\$	-	\$		\$ 21,085,219
Perpetual Preferred stock								
Industrial and Misc	\$ -	\$	-	\$	-	\$	-	\$ -
Parent, Subsidiaries and Affiliates			-		-			-
Total Perpetual Preferred Stocks	\$ -	\$	-	\$	-	\$	-	\$ -
Bonds								
U.S. Governments	\$ -	\$	-	\$	-	\$	-	\$ -
Industrial and Misc	-		-		-		-	-
Hybrid Securities	-		-		-		-	-
Parent, Subsidiaries and Affiliates	 		-		-		-	-
Total Bonds	\$ -	\$	-	\$	-	\$	-	\$ -
Common Stock								
Industrial and Misc	\$ -	\$	-	\$	-	\$	-	\$ -
Parent, Subsidiaries and Affiliates	_		-		-		-	-
Total Common Stocks	\$ -	\$	-	\$	-	\$	-	\$ -
Derivative assets								
Interest rate contracts	\$ -	\$	-	\$	-	\$	-	\$ -
Foreign exchange contracts	-		-		-		-	-
Credit contracts	-		-		-		-	-
Commodity futures contracts	-		-		-		-	-
Commodity forward contracts	_		-		-		-	-
Total Derivatives	\$ -	\$		\$	-	\$	-	\$
Separate account assets	\$ 	\$	-	\$		\$		\$ -
Total assets at fair value	\$ 21,085,219	\$	-	\$	-	\$	-	\$ 21,085,219
b. Liabilities at fair value								
Derivative liabilities	\$ <u> </u>	\$		\$		\$		\$
Total liabilities at fair value	\$ -	\$	-	\$	-	\$		\$ -

The following table summarizes fair value measurements by level at December 31, 2018 for assets and liabilities measured at fair value on a recurring basis.

Description for each class of asset or liability	 (Level 1)	(Le	vel 2)	(Le	vel 3)	Asset e (NAV)	 Total
a. Assets at fair value							
Cash, Short Term Investments and Cash Equivalents	\$ 38,059,030	\$		\$	-	\$ -	\$ 38,059,030
Perpetual Preferred stock		'					
Industrial and Misc	\$ -	\$	-	\$	-	\$ -	\$ -
Parent, Subsidiaries and Affiliates	-		-		-	-	-
Total Perpetual Preferred Stocks	\$ -	\$	-	\$	-	\$ -	\$ -
Bonds							
U.S. Governments	\$ -	\$	-	\$	-	\$ -	\$ -
Industrial and Misc	-		-		-	-	-
Hybrid Securities	-		-		-	-	-
Parent, Subsidiaries and Affiliates	 				-	 	
Total Bonds	\$ -	\$	-	\$	-	\$ -	\$ -
Common Stock							
Industrial and Misc	\$ -	\$	-	\$	-	\$ -	\$ -
Parent, Subsidiaries and Affiliates	 				-	 	
Total Common Stocks	\$ -	\$	-	\$	-	\$ -	\$ -
Derivative assets							
Interest rate contracts	\$ -	\$	-	\$	-	\$ -	\$ -
Foreign exchange contracts	-		-		-	-	-
Credit contracts	-		-		-	-	-
Commodity futures contracts	-		-		-	-	-
Commodity forward contracts	 <u> </u>						
Total Derivatives	\$ <u> </u>	\$	-	\$	-	\$ -	\$ -
Separate account assets	\$ -	\$	-	\$	-	\$ -	\$ -
Total assets at fair value	\$ 38,059,030	\$		\$		\$ -	\$ 38,059,030
b. Liabilities at fair value							
Derivative liabilities	\$ -	\$	-	\$	-	\$ -	\$ -
Total liabilities at fair value	\$ -	\$	-	\$		\$ -	\$ -

B. Fair Value Disclosures Under Other Pronouncements

None

C. Aggregate Fair Value for All Financial Statements

The following table summarizes fair value measurements by level at September 30, 2019 for all financial instruments:

	Ag	gregate Fair							Net Asset	Not Practicable
Type of Financial Instrument		Value	ie Admitted Assets		Level I		Level II	Level III	Value (NAV)	(Carrying Value)
Cash, Short Term Investments and cash equivalents	\$	21,085,219	\$	21,085,219	\$	21,085,219				_
D J-	•	1 552 006	ø.	1 550 407	•		1 552 006			

The following table summarizes fair value measurements by level at December 31, 2018 for all financial instruments:

	Αg	gregate Fair						Net Asset	Not Practicable
Type of Financial Instrument		Value	Adr	mitted Assets	 Level I	Level II	Level III	Value (NAV)	(Carrying Value)
Cash, Short Term Investments and cash equivalents	\$	38,059,030	\$	38,059,030	\$ 38,059,030	_	_	_	_
Bonds	S	24 249 763	\$	24 322 108	\$ _	24 249 763	_	_	_

D. Not Practicable to Estimate Fair Value

None

E. Investments Measured Using the NAV Practical Expedient

None

20. Other Items

No Change

21. Events Subsequent

Subsequent events have been considered through November 15, 2019 for the statutory statement issued on November 15, 2019

Type I – Recognizable Subsequent Events

No change

Type II – Non-recognizable Subsequent Events

Not applicable

22. Reinsurance No change

23. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. The Company estimates accrued retrospective premiums for its comprehensive individual health insurance business in accordance with the regulations put forth in Title 45 of the Code of Federal Regulations Part 153, Subpart F for the ACA Risk Corridors program and Title 45 of the Code of Federal Regulations Part 158 for the ACA MLR Rebate program.
- B. The Company records accrued retrospective premiums through written premium.
- C. The amount of net premiums written by the Company at September 30, 2019 which are subject to retrospective rating features was \$98.4M, which represents 96% of the total net premiums written.
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act –

	1	2	3	4	5
				Other	
		Small	Large	Categories	
		Group	Group	with	
	Individual	Employer	Employer	Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	-
(3) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	\$ -
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	\$ -
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(8) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(9) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	\$ -
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	\$ -
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -

E. Risk-Sharing provisions of the Affordable Care Act (ACA)

Risk Sharing Provisions of the Affordable Care Act

2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year a) Permanent ACA Risk Adjustment Program

1) Premium adjustments receivable due to ACA Risk Adjustment (including HCRP) 2) Risk adjustment user fees payable for ACA Risk Adjustment 70,943 3) Premium adjustments payable due to ACA Risk Adjustment 70,945 4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) 70,943 ***Distributional ACA Reinsurance Program** Assets 1) Amounts recoverable for claims paid due to ACA Reinsurance 2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) 3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance 7) Ceded reinsurance premiums due to ACA Reinsurance 9) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance 9) Ceded reinsurance premiums due to ACA Reinsurance 9) ACA Reinsurance contributions - not reported as ceded premium 17,649 8) Reinsurance contributions - not reported as ceded premium 2) ACA Reinsurance contributions - not reported as ceded premium 2) Coperations (Revenue & Expense) 1) Accused retrospective premium due to ACA Reinsurance payments or expected payments 10) Accused retrospective premium due to ACA Risk Corridors 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Coperations (Revenue & Expense) 3) Effect of ACA Risk Corridors on change in reserves for rate credits 4) Effect of ACA Risk Corridors on change in reserves for rate credits 5) Effect of ACA Risk Corridors on change in reserves for rate credits	Assets	
2) Risk adjustment user fees payable for ACA Risk Adjustment 3) Premium adjustments payable due to ACA Risk Adjustment Operations (Revenue & Expense) 4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) 70,943 70,943 70,943 70,943 70,943 70,943 70,944 70,945 70,		-
3) Premium adjustments payable due to ACA Risk Adjustment Operations (Revenue & Expense) 4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) ***Di Transitional ACA Reinsurance Program** **Di Transitional ACA Reinsurance Program** Assetts 1) Amounts recoverable for claims paid due to ACA Reinsurance 2) Amounts recoverable for claims paid due to ACA Reinsurance (Contra Liability) 3) Amounts recoverable relating to uninsured plans for contributions for ACA Reinsurance Liabilities 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance payments or expected payments 8) Reinsurance premiums due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium Assets 1) Accrued retrospective premium due to ACA Reinsurance payments or expected payments 1) Accrued retrospective premium due to ACA Risk Corridors Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Coperations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income		
Operations (Revenue & Expense) 4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) 70,943 **Distributional ACA Reinsurance Program** Assets 1) Amounts recoverable for claims paid due to ACA Reinsurance 2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) 3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance Liabilities 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 4) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance premiums due to ACA Reinsurance 9) ACA Reinsurance premiums due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium Assets 1) Accrued retrospective premium due to ACA Risk Corridors 1) Accrued retrospective premium due to ACA Risk Corridors 1) Accrued retrospective premium due to ACA Risk Corridors 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors 2) Effect of ACA Risk Corridors on net premium income - Corrections (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income		
4) Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk adjustment 5) Reported in expenses as ACA risk adjustment user fees (incurred/paid) 70,943 7		7,297,549
b) Transitional ACA Reinsurance Program Assets 1) Amounts recoverable for claims paid due to ACA Reinsurance 2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) 3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance Liabilities 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance premiums due to ACA Reinsurance 9) ACA Reinsurance premiums due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium cc) Temporary ACA Risk Corridors Program Assets 1) Accrued retrospective premium due to ACA Risk Corridors Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income		
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1) Amounts recoverable for claims paid due to ACA Reinsurance	b) Transitional ACA Reinsurance Program	
2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	Assets	
3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance Liabilities 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance premiums due to ACA Reinsurance 8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium - c) Temporary ACA Risk Corridors Program Assets 1) Accrued retrospective premium due to ACA Risk Corridors Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	1) Amounts recoverable for claims paid due to ACA Reinsurance	
Liabilities 4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance premiums due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium - c) Temporary ACA Risk Corridors Program Assets 1) Accrued retrospective premium due to ACA Risk Corridors 1) Accrued retrospective premium due to ACA Risk Corridors 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	2) Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	-
4) Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premiums 5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance premiums due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium	3) Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	 _
5) Ceded reinsurance premiums payable due to ACA Reinsurance 6) Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium - c) Temporary ACA Risk Corridors Program Assets 1) Accrued retrospective premium due to ACA Risk Corridors 1) Accrued retrospective premium due to ACA Risk Corridors 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	Liabilities	
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Operations (Revenue & Expense) 7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium	5) Ceded reinsurance premiums payable due to ACA Reinsurance	
7) Ceded reinsurance premiums due to ACA Reinsurance 8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium - c) Temporary ACA Risk Corridors Program Assets 1) Accrued retrospective premium due to ACA Risk Corridors 1) Accrued retrospective premium due to ACA Risk Corridors 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	
8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments 9) ACA Reinsurance contributions - not reported as ceded premium	Operations (Revenue & Expense)	
9) ACA Reinsurance contributions - not reported as ceded premium	7) Ceded reinsurance premiums due to ACA Reinsurance	17,649
c) Temporary ACA Risk Corridors Program Assets 1) Accrued retrospective premium due to ACA Risk Corridors Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	8) Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	
Assets 1) Accrued retrospective premium due to ACA Risk Corridors Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	9) ACA Reinsurance contributions - not reported as ceded premium	
1) Accrued retrospective premium due to ACA Risk Corridors Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	c) Temporary ACA Risk Corridors Program	
Liabilities 2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	Assets	
2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	1) Accrued retrospective premium due to ACA Risk Corridors	-
Operations (Revenue & Expense) 3) Effect of ACA Risk Corridors on net premium income	Liabilities	<u> </u>
3) Effect of ACA Risk Corridors on net premium income	2) Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	
· · · · · · · · · · · · · · · · · · ·	Operations (Revenue & Expense)	
4) Effect of ACA Risk Corridors on change in reserves for rate credits	3) Effect of ACA Risk Corridors on net premium income	
	4) Effect of ACA Risk Corridors on change in reserves for rate credits	-

¹⁾ Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NC Yes

								Diffe	rences	S		Adjustments		Unset	led Balances	as of th	he Reporting Date
					Received or P	aid as c	f the Current Year	n						Cum	lative Balanc	e Cur	mulative Balance
	Accru	ued During the P	rior Y	ear on Business	Business Writt	en Befo	re December 31 of	the Prior Year Accrued Less	Pric	or Year Accrued Less	To Prior Year	To Prior Year		from F	rior Years (C	ol from	n Prior Years (Col
	Writter	n Before Decem	ber 3	of the Prior Year		Prior	Year	Payments (Col 1-3)	Р	Payments (Col. 2-4)	Balances	Balances			1-3+7)		2-4+8)
		1		2	3		4	5	i	6	7	8			9		10
	F	Receivable		(Payable)	Receivabl		(Payable)	Receivable		(Payable)	Receivable	(Payable)	Ref		Receivable		(Payable)
a) Permanent ACA Risk Adjustment Program																	
1) Premium adjustments receivable	\$	-	\$	-	\$	-	\$ -	-	\$		\$ -	\$ -	Α	\$	-	\$	
2) Premium adjustments (payable)	\$	-	\$	(5,364,810)	\$	-	\$ (6,184,8	92) -	\$	820,082	\$	\$ (820,082)	В	\$	-	\$	(0)
3) Subtotal ACA Permanent Risk Adjustment Program	\$		\$	(5,364,810)	\$	-	\$ (6,184,8	- 32)	\$	820,082	\$	\$ (820,082)		\$		\$	(0)
b) Transitional ACA Reinsurance Program																	
1) Amounts recoverable for claims paid	\$	33,542	\$	-	\$ 5	1,191	\$ -	(17,649) \$	-	\$ 17,649	\$ -	С	\$		\$	-
2) Amounts recoverable for claims unpaid (contra liability)	\$		\$	-	\$	-	\$ -	-	\$		\$	\$ -	D	\$		\$	
3) Amounts receivable relating to uninsured plans	\$		\$	-	\$	-	\$ -	-	\$		\$ -	\$ -	Е	\$	-	\$	
Liabilities for contributions payable due to ACA													_				
Reinsurance - not reported as ceded premium	\$	•	\$	-	\$	-	\$ -	•	\$	-	\$ •	\$ -	F	\$		\$	
5) Ceded reinsurance premiums payable	\$		\$	-	\$	-	\$ -	-	\$	-	\$	\$ -	G	\$	-	\$	-
6) Liability for amounts held under uninsured plans	\$	-	\$	-	\$	-	\$ -	-	\$	-	\$	\$ -	Н	\$	-	\$	
7) Subtotal ACA Transitional Reinsurance Program	\$	33,542	\$	-	\$ 51	,191	\$ -	(17,649) \$	-	\$ 17,649	\$ -		\$	-	\$	-
c) Temporary ACA Risk Corridors Program																	
1) Accrued retrospective premium	\$	-	\$	-	\$	-	\$ -	-	\$		\$ -	\$ -	1	\$	-	\$	
2) Reserve for rate credits or policy experience rating refunds	\$		\$	-	\$	-	\$ -	-	\$		\$	\$ -	J	\$		\$	
3) Subtotal ACA Risk Corridors Program	\$	•	\$	-	\$	-	\$ -	-	\$		\$	\$ -	•	\$		\$	-
d. Total for ACA Risk Sharing Provisions	\$	33,542	\$	(5,364,810)	\$ 51	,191	\$ (6,184,8	92) (17,649) \$	820,082	\$ 17,649	\$ (820,082)		\$	-	\$	(0)

4) Rollforward of Risk Corridors Asset and Liability Balance	,	3																		
				Т				Differe	ences	3				Adjustments			Unsettled	Balances a	as of the R	eporting Da
		rued During the F en Before Decem		Busi				Prior Year Accrued Less Payments (Col 1-3)	rued Less Prior Year Accrued Less Col 1-3) Payments (Col. 2-4)		To Prior Year Balances		To Prior Year Balances				from Prior	ve Balance Years (Col 3+7)	from Prio	ntive Baland or Years (C 2-4+8)
		1	2		3 4		5		6		7		8				9		10	
		Receivable	(Payable)		Receivable		(Payable)	Receivable		(Payable)		Receivable		(Payable)	Re	f	Rece	eivable	(P:	ayable)
a) 2014																				
Accrued retrospective premium	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-	A		\$	-	\$	-
2. Reserve for rate credits or policy experience rating refunds	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$		В		\$	-	\$	-
	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-			\$	-	\$	-
b) 2015																				
Accrued retrospective premium	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-	С		\$	-	\$	-
2. Reserve for rate credits or policy experience rating refunds	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-	D		\$		\$	-
c) 2016	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-	F		\$	-	\$	
Accrued retrospective premium	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-	G		\$	-	\$	
2. Reserve for rate credits or policy experience rating refunds	\$	-	\$ -	\$	-	\$	-	-	\$	-	\$	-	\$	-	Н		\$	-	\$	-
d) Total for Risk Corridors	S		\$ 	\$	_	s	_	_	\$	_	\$		s	_	S		s	_	\$	

	1	2	3	4	5	6
	Estimated Amount	Non-Accrued				
	to be filed/final	Amounts fro		Asset balance gross		
	amount filed with	Impairment of Other	Amounts received	of non-admission		Net admitted assets (
Risk Corridors Program Year	federal agency	Reasons	from CMS	(1-2-3)	Non-admitted amounts	5)
a. 2014	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. 2015	\$ 4,524,488.00	\$ 4,524,488.00	\$ -	\$ -	\$ -	\$ -
c. 2016	\$ 6,742,797.00	\$ 6,742,797.00	\$ -	\$ -	\$ -	\$ -
d. Total (a+b+c)	\$ 11,267,285.00	\$ 11,267,285.00	\$ -	\$ -	\$ -	\$ -

24. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves for incurred claims as of December 31, 2018 was \$15.5M. As of September 30, 2019, \$14.2M has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years is now \$352k for incurred claims and \$0 for unpaid claims adjustment expense as a result of re-estimation of unpaid claims and claims adjustment expenses, and evaluation of liabilities associated with legal actions that arise in the normal course of business. The Company experienced \$950k of favorable prior year development since December 31, 2018 generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims.
- B. There has been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expense.

25. Intercompany Pooling Arrangements

No change

26. Structured Settlements

No change

27. Health Care Receivables

No significant changes

28. Participating Policies

None

29. Premium Deficiency Reserves

No significant changes.

30. Anticipated Salvage and Subrogation

None.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1	Did the reporting entity experience any material Domicile, as required by the Model Act?	transactions requiring the filing of Disclosure of M				Yes	[]	No [X]
1.2	If yes, has the report been filed with the domicilia					Yes	[]	No []
2.1	Has any change been made during the year of treporting entity?	nis statement in the charter, by-laws, articles of in	corporation, or o	deed of settlen	nent of the	Yes	; []	No [X]
2.2	If yes, date of change:							
3.1		Holding Company System consisting of two or n				Yes	[X]	No []
	If yes, complete Schedule Y, Parts 1 and 1A.							
3.2	Have there been any substantial changes in the	organizational chart since the prior quarter end?				Yes	[]	No [X]
3.3	If the response to 3.2 is yes, provide a brief desc	cription of those changes.						
3.4	Is the reporting entity publicly traded or a member	er of a publicly traded group?				Yes	[X]	No []
3.5	If the response to 3.4 is yes, provide the CIK (Ce	entral Index Key) code issued by the SEC for the	entity/group				000	1071739
4.1	Has the reporting entity been a party to a merge	r or consolidation during the period covered by th	is statement?			Yes	[]	No [X]
	If yes, complete and file the merger history data	file with the NAIC for the annual filing correspond	ing to this period	d.				
4.2	If yes, provide the name of entity, NAIC Comparceased to exist as a result of the merger or cons		e abbreviation) f	or any entity th	nat has			
		1 Name of Entity NAI	2 C Company Cod	e State of				
6 1	If yes, attach an explanation.	significant changes regarding the terms of the ac	·			Yes [X] No		
6.1		ation of the reporting entity was made or is being					12/	31/201/
6.2	This date should be the date of the examined ba	nination report became available from either the salance sheet and not the date the report was com	oleted or release	ed	g enuty.		12/	31/2014
6.3	or the reporting entity. This is the release date of	ation report became available to other states or tr completion date of the examination report and r	ot the date of the	e examination	(balance		06/	24/2019
6.4	By what department or departments?							
0.5	Arkansas Insurance Department							
6.5	statement filed with Departments?					Yes [] No		
	Have all of the recommendations within the lates					Yes [] No	[]	NA [X]
7.1	Has this reporting entity had any Certificates of Assuspended or revoked by any governmental entitle.	Authority, licenses or registrations (including corpity during the reporting period?	orate registration	i, if applicable) 	Yes	[]	No [X]
7.2	If yes, give full information:							
8.1	Is the company a subsidiary of a bank holding co	ompany regulated by the Federal Reserve Board)			Yes	[]	No [X]
8.2	If response to 8.1 is yes, please identify the name	e of the bank holding company.						
8.3	Is the company affiliated with one or more banks					Yes	[]	No [X]
8.4	federal regulatory services agency [i.e. the Fede	ne names and location (city and state of the main ral Reserve Board (FRB), the Office of the Comp recurities Exchange Commission (SEC)] and ider	troller of the Cur	rency (OCC),	the Federal			
	1	2	3	4	5	6]	
	Affiliate Name	Location (City State)	FRB	OCC	FDIC	SEC		

GENERAL INTERROGATORIES

9.1	similar functions) of the reporting entity subject to a code of ethics, which include			Yes [X] No []
	(a) Honest and ethical conduct, including the ethical handling of actual or appare	ent conflicts of interest betwee	en personal and professional relat	ionships;
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic repo	rts required to be filed by the	reporting entity;	
	(c) Compliance with applicable governmental laws, rules and regulations;(d) The prompt internal reporting of violations to an appropriate person or person	as identified in the code; and		
	(e) Accountability for adherence to the code.	is identified in the code, and		
9.11	If the response to 9.1 is No, please explain:			
9.2	Has the code of ethics for senior managers been amended?			Yes [] No [X]
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).			
9.3	Have any provisions of the code of ethics been waived for any of the specified of			Yes [] No [X]
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).			
	FIN	ANCIAL		
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or aff	iliates on Page 2 of this stater	ment?	Yes [X] No []
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amou		\$	13,300,000
		STMENT		
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, pla for use by another person? (Exclude securities under securities lending agreement agreement of the stocks) and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the reporting entity loaned, place and the stocks of the st			Yes [] No [X]
11.2	If yes, give full and complete information relating thereto:			
12.	Amount of real estate and mortgages held in other invested assets in Schedule E			0
13.	Amount of real estate and mortgages held in short-term investments:		\$	0
14.1	Does the reporting entity have any investments in parent, subsidiaries and affilia	ates?		Yes [] No [X]
14.2	If yes, please complete the following:			
		1 Prior Year-End	2 Current Quarte	r
		Book/Adjusted	Book/Adjusted	
	14.21 Bonds	Carrying Value	Carrying Value	
	14.22 Preferred Stock	\$	9	
	14.23 Common Stock	\$ \$		
	14.25 Mortgage Loans on Real Estate	\$	•	
	14.26 All Other	\$	\$	
	14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$	0 \$	0
	14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$		
15.1	Has the reporting entity entered into any hedging transactions reported on Sched	dule DB?		Yes [] No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available.	lable to the domiciliary state?		Yes [] No []
	If no, attach a description with this statement.			
16	For the reporting entity's security lending program, state the amount of the follow	=		٥
	 Total fair value of reinvested collateral assets reported on Schedule DL, Total book adjusted/carrying value of reinvested collateral assets reporte 		The state of the s	0 0
	16.3 Total navable for securities lending reported on the liability page	a c concadio DE, i dito i dii	Ψ	Λ

GENERAL INTERROGATORIES

17.	entity's offices, vaults pursuant to a custodi Considerations, F. O	s or safety deposit boxes ial agreement with a qual	, were all stocks, boi ified bank or trust co actions, Custodial or	nds and othe ompany in ac Safekeeping	r securities, owned cordance with Sect Agreements of the	tments held physically in the reporting throughout the current year held ion 1, III – General Examination NAIC Financial Condition Examiners	
17.1	For all agreements the	nat comply with the requir	rements of the NAIC	Financial Co	ondition Examiners	Handbook, complete the following:	
		Name	1 e of Custodian(s)			2 Custodian Address	
		Clearwater			777 W. Main St.	Suite 900, Boise ID 83702	
17.2	For all agreements the location and a complete		e requirements of th	e NAIC <i>Finar</i>	ncial Condition Exa	miners Handbook, provide the name,	
		1 Name(s)		2 Location((s)	3 Complete Explanation(s)	
17.3	Have there been any	changes, including nam	e changes, in the cu	ıstodian(s) id	entified in 17.1 duri	ng the current quarter?	Yes [] No [X]
17.4	If yes, give full and co	omplete information relat					
		1 Old Custodian	2 New Cust	odian	3 Date of Change	4 Reason	
	reporting entity, note	as such. ["that have ad	ccess to the investm		"; "…handle securit	ged internally by employees of the ties"] 2	
	(i.e., designated with 8 For firms/individuals	riduals listed in the table to a "U") manage more that unaffiliated with the repose under management ago	an 10% of the report orting entity (i.e., des	ing entity's as signated with	ssets? a "U") listed in the t		Yes [] No [X]
17.6		dividuals listed in the table		filiation code		"U" (unaffiliated), provide the informa	
	1 Central Regis Depository N	stration Na umber	2 ame of Firm or Individual		3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
	Have all the filing rec If no, list exceptions:		es and Procedures i	Manual of the	e NAIC Investment i	Analysis Office been followed?	Yes [X] No [
19.	Documentation a. PL security is b. Issuer or oblic c. The insurer h	on necessary to permit a s not available. igor is current on all contr nas an actual expectation	full credit analysis of acted interest and p	of the security principal paym t of all contra	y does not exist or a nents. cted interest and pi	self-designated 5GI security: an NAIC CRP credit rating for an FE o	
20.	By self-designating F a. The security b. The reporting The NAIC Dec. shown on a constant of the security	PLGI securities, the repor was purchased prior to J g entity is holding capital esignation was derived fr	ting entity is certifyir anuary 1, 2018. commensurate with om the credit rating g held by the insurer	the NAIC De assigned by r and availabl	ng elements of each signation reported to an NAIC CRP in it le for examination b	n self-designated PLGI security: for the security. Is legal capacity as a NRSRO which in the security of the security of the security.	
	Has the reporting ent	tity self-designated PLGI	securities?				Yes [] No [X]

GENINTPT1 - Attachment

General Interrogatories Part 1 Attachments

The Management Service Agreement is made and is effective as of July 1, 2014 by the QualChoice Health Plan Services, Inc. a Colorado for-profit corporation and QualChoice Life and Health Company Inc. (QCLH), an Arkansas for-profit corporation. QualChoice Health Plan Services has agreed to provide a full range of administrative, management, and technology services to QCLH under QCLH's direction as set forth in the contract agreement. In consideration of QualChoice Health Plan Services' performance of services in connection with QCLH's business, for each month (or part thereof) beginning on the effective date and continuing through the term hereof, QCLH shall pay to QualChoice Health Plan Services a service fee as set forth in the Management Service Agreement. This Management Agreement terminated at the time of acquisition by Centene Corporation on April 1, 2019.

GENERAL INTERROGATORIES

PART 2 - HEALTH

Operating Percentages:				
1.1 A&H loss percent	93.7 %			
1.2 A&H cost containment percent	2.2 %			
1.3 A&H expense percent excluding cost containment expenses.	15.7 %			
2.1 Do you act as a custodian for health savings accounts?	Yes [] No [X]			
2.2 If yes, please provide the amount of custodial funds held as of the reporting date\$				
2.2 If yes, please provide the amount of custodial funds held as of the reporting date				
2.4 If yes, please provide the balance of the funds administered as of the reporting date				
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [X] No []			
3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No [X]			

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date										
1 NAIC	2	3 Effective	4	5	6 Type of	7	8 Certified Reinsurer Rating	9 Effective Date of Certified		
Company Code	ID Number	Date	Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Ceded	Type of Reinsurer	(1 through 6)	Reinsurer Rating		
Company Code	IB ITAIIIBOI	Date	LIFE & ANNUITY - AFFILIATES	Cancaloni	00000	Type of Remodrer	(1 till odgil o)	Tromodror realing		
			LIFE & ANNULTY = NON-AFFILIATES							
38636	13-3031176	01/01/2017	DADTNED DEING CO OF THE HE	NY	SSL/G/A					
			ACCIDENT & HEALTH — AFFILIATES							
			ACCIDENT & HEALTH — AFFILIATES ACCIDENT & HEALTH — NON-AFFILIATES IRONSHORE IND INC IRONSHORE IND INC PARTNER REINS CO OF THE US PARTNER REINS CO OF THE US PARTNER REINS CO OF THE US							
23647 23647	41-0121640	01/01/2019	IRONSHORE IND INC.	MN						
23647	41-0121640	L01/01/2019	I RONSHORE IND INC.	. MN	SSL/G/A					
38636 38636	13-3031176 13 3031176	L01/01/2017 01/01/2017	PARTNER REINS OU UF THE US	NYNYNY	SSL/G/A SSL/I/A					
	13-3031170	01/01/2017	PROPERTY/CASUALTY — AFFILIATES	NI						
			PROPERTY/CASUALTY — NON-AFFILIATES		1					
			FROFERIT/ONOUNETT - NORT-ALTIETATES							
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

Direct Business Only Federal Employees Health Life & Annuity Accident & Benefits Property/ Total Active Medicare Medicaid Columns Deposit-Type Program Other Premiums States. Etc Status (a) Title XVIII Title XIX Premiums Consideration Premiums 2 Through 7 Contracts 1. Alabama ALN 0 2. Alaska ΔK Ν 0 3. Arizona Α7 Ν 0 4. Arkansas AR .101,486,597 883.077 102.369.674 5. California CA Ν 0 6. СО N. 0 7. СТ N .0 8. Delaware . DE N. 0 .0 9. Dist. Columbia DC N. 10. Florida FL .0 GΑ N. .0 11. Georgia .N. .0 12. Hawaii ΗΙ .0 Ν 13. Idaho ID .0 14. Illinois IL N. 0 15. Indiana IN Ν 16. lowa IΑ Ν 0 17. Kansas KS Ν 0 18. Kentucky ΚY Ν 0 19. Louisiana LA N 0 20. Maine ME Ν 0 21. Maryland MD N. 0 22. Massachusetts MA Ν .0 N. 0 23. Michigan . МІ MN 0 24. Minnesota N. 25. Mississippi ... MS 26. Missouri . МО N. .0 ۵. МТ .N. 27. Montana .0 28. Nebraska ΝE 29. Nevada ... NV .N. .0 Ν 0 30. New Hampshire NH 0 31. New Jersey NJ Ν 32. New Mexico NM Ν 0 33. New York NY Ν 0 34. North Carolina NC N 0 35. North Dakota ND Ν 0 36. Ohio.. ОН N Λ 37. Oklahoma OK Ν 0 OR N. 0 Oregon .. 39. РΑ N 0 Pennsylvania 0 40. Rhode Island RI 41. South Carolina SC N. .0 .0 42. South Dakota. .N. SD N. .0 ΤN 43. Tennessee .. ΤX N. .0 44. Texas 45. Utah UT N. .0 46. Vermont VT Ν 0 47 Virginia V۸ Ν 0 48. Washington WA Ν 0 49. West Virginia ۱۸۸/ N 0 50. Wisconsin WI Ν 0 51. Wyoming WY N Λ American Samoa ... 52. AS Ν 0 N. 0 53. Guam ... GU 54. Puerto Rico ... PR N 0 55. U.S. Virgin Islands ... VI .N. 0 56. Northern Mariana Islands MP .N. .0 CAN ۵. 57. CanadaN. XXX. 0 0 ..0 .0 .0 0 .0 58. Aggregate other alien .. .QT XXX .101,486,597 .0 .883,077 .102,369,674 .0 .0 ..0 59. Subtotal... .0 60. Reporting entity contributions for Employee Benefit Plans.. XXX 0 61. Total (Direct Business) XXX 101,486,597 0 0 0 883,077 102,369,674 DETAILS OF WRITE-INS 58001 XXX 58002 ХХХ 58003. XXX. 58998. Summary of remaining write-ins for ХХХ 0 0 0 ..0 .0 0 0 Line 58 from overflow page. 58999 Totals (Lines 58001 through 58003 XXX 0 0 0 0 0 0 plus 58998) (Line 58 above) 0

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG R – Registered – Non-domiciled RRGs .0 Q - Qualified - Qualified or accredited reinsurer

(a) Active Status Counts

E – Eligible – Reporting entities eligible or approved to write surplus lines in the state N – None of the above – Not allowed to write business in the state

Contains Communities	40.4400047	DE	
Centene Corporation	42-1406317	DE	74040
Bankers Reserve Life Insurance Company of Wisconsin	39-0993433	WI	71013
Health Plan Real Estate Holding, Inc (17%)	46-2860967	MO	10015
Peach State Health Plan, Inc	20-3174593	GA	12315
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Iowa Total Care, Inc	46-4829006	IA	15713
Buckeye Community Health Plan, Inc	32-0045282	ОН	11834
Health Plan Real Estate Holding, Inc (13%)	46-2860967	MO	
Absolute Total Care, Inc	20-5693998	SC	12959
Health Plan Real Estate Holding, Inc (1%)	46-2860967	MO	
Coordinated Care Corporation d/b/a Managed Health Services	39-1821211	IN	95831
Health Plan Real Estate Holding, Inc (15%)	46-2860967	MO	
Healthy Washington Holdings, Inc	46-5523218	DE	
Coordinated Care of Washington, Inc	46-2578279	WA	15352
Managed Health Services Insurance Corp	39-1678579	WI	96822
Health Plan Real Estate Holding, Inc (2%)	46-2860967	MO	
Hallmark Life Insurance Co	86-0819817	ΑZ	60078
Superior HealthPlan, Inc	74-2770542	TX	95647
Health Plan Real Estate Holding, Inc (21%)	46-2860967	MO	
Healthy Louisiana Holdings LLC	27-0916294	DE	
Louisiana Healthcare Connections, Inc	27-1287287	LA	13970
Magnolia Health Plan Inc	20-8570212	MS	13923
IlliniCare Health Plan, Inc	27-2186150	IL	14053
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunshine Health Holding LLC	26-0557093	FL	
Sunshine State Health Plan, Inc	20-8937577	FL	13148
Kentucky Spirit Health Plan, Inc	45-1294925	KY	14100
Healthy Missouri Holding, Inc (95%)	45-5070230	MO	
Home State Health Plan, Inc	45-2798041	MO	14218
Health Plan Real Estate Holding, Inc (5%)	46-2860967	MO	
Sunflower State Health Plan, Inc	45-3276702	KS	14345
Granite State Health Plan, Inc	45-4792498	NH	14226
California Health and Wellness Plan	46-0907261	CA	
Michigan Complete Health, Inc.	30-0312489	MI	10769
Western Sky Community Care, Inc.	45-5583511	NM	16351
SilverSummit Healthplan, Inc.	20-4761189	NV	16143
University Health Plans, Inc.	22-3292245	NJ	
Agate Resources, Inc.	20-0483299	OR	
Trillium Community Health Plan, Inc.	42-1694349	OR	12559
Nebraska Total Care, Inc.	47-5123293	NE	15902
Pennsylvania Health & Wellness, Inc.	47-5340613	PA	16041
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Superior HealthPlan Community Solutions, Inc.	47-5664832	TX	15912
Sunshine Health Community Solutions, Inc.	47-5667095	FL	15927
Buckeye Health Plan Community Solutions, Inc.	47-5664342	OH	16112
Arkansas Health & Wellness Health Plan, Inc.	81-1282251	AR	16130
Arkansas Total Care Holding Company, LLC (49%)	38-4042368	DE	
Arkansas Total Care, Inc.	82-2649097	AR	16256
Oklahoma Complete Health Inc.	81-3121527	OK	
Bridgeway Health Solutions, LLC	20-4980875	DE	
Bridgeway Health Solutions of Arizona Inc.	20-4980818	AZ	16310
Celtic Group, Inc	36-2979209	DE	
Celtic Insurance Company	06-0641618	IL	80799
Ambetter of Magnolia Inc	35-2525384	MS	15762
Ambetter of Peach State Inc.	36-4802632	GA	15729
Novasys Health, Inc	27-2221367	DE	
CeltiCare Health Plan Holdings LLC	26-4278205	DE	
CeltiCare Health Plan of Massachusetts, Inc.	26-4818440	MA	13632
Centene Management Company LLC	39-1864073	WI	
CMC Real Estate Co. LLC	20-0057283	DE	
Centene Center LLC	26-4094682	DE	
Centene Center I, LLC	82-1816153	DE	
Centene Center II, LLC	47-5156015	DE	
Centene Center III, LLC	82-3210933	DE	
CMC Hanley, LLC	46-4234827	MO	
GPT Acquisition LLC	45-5431787	DE	
Illinois Health Practice Alliance, LLC (50%)	82-2761995	DE	
Integregated Care Network of Florida, LLC	84-3023173	DE	
Lifeshare Management Group, LLC	46-2798132	NH	
Arkansas Total Care Holding Company, LLC (25%)	38-4042368	DE	
CCTX Holdings, LLC	20-2074217	DE	
Centene Company of Texas, LP (1%)	74-2810404	TX	
Centene Holdings, LLC	20-2074277	DE	
Centene Company of Texas, LP (99%)	74-2810404	TX	
MHS Travel & Charter, Inc	43-1795436	WI	
Health Care Enterprises, LLC	46-4855483	DE	
Integrated Mental Health Management, L.L.C.	74-2892993	TX	
Integrated Mental Health Services	74-2785494	TX	
Envolve Holdings, LLC	22-3889471	DE	
Cenpatico Behavioral Health, LLC	68-0461584	CA	
CBHSP Arizona, Inc	86-0782736	AZ	
Cenpatico of California, Inc	47-2595704	CA	
Cenpatico Behavioral Health of Arizona, LLC	20-1624120	AZ	

Cenpatico of Arizona Inc.	80-0879942	AZ	
Envolve, Inc.	37-1788565	DE	
Envolve - New York, Inc.	47-3454898	NY	
Envolve PeopleCare, Inc.	06-1476380	DE	
LiveHealthier, Inc.	47-2516714	DE	
Envolve Benefits Options, Inc.	61-1846191	DE	
Envolve Vision Benefits, Inc.	20-4730341	DE	
Envolve Captive Insurance Company, Inc.	36-4520004	SC	
Envolve Vision of Texas, Inc.	75-2592153	TX	95302
Envolve Vision, Inc	20-4773088	DE	
Envolve Vision IPA of New York, Inc.	83-2460878	NY	
Envolve Vision of Florida, Inc	65-0094759	FL	
Envolve Total Vision, Inc.	20-4861241	DE	
Envolve Optical, Inc.	82-2908582	DE	
Envolve Dental, Inc.	46-2783884	DE	
Envolve Dental of Florida, Inc.	81-2969330	FL	
Envolve Dental of Texas, Inc.	81-2796896	TX	16106
Envolve Dental IPA of New York, Inc.	83-1464482	NY	
Envolve Pharmacy Solutions, Inc.	77-0578529	DE	
LBB Industries, Inc	76-0511700	TX	
RX Direct, Inc	75-2612875	TX	
Envolve Pharmacy IPA, LLC	46-2307356	NY	
Casenet LLC	90-0636938	DE	
Casenet S.R.O.	Foreign	CZE	
MHM Services, Inc.	82-5316510	DE	
Centurion LLC	90-0766502	DE	
Centurion of Arizona, LLC	81-4228054	AZ	
Centurion of Vermont, LLC	47-1686283	VT	
Centurion of Mississippi, LLC	47-2967381	MS	
Centurion of Tennessee, LLC	30-0752651	TN	
Centurion of Minnesota, LLC	46-2717814	MN	
Centurion Correctional Healthcare of New Mexico, LLC	81-1161492	NM	
Centurion of Florida, LLC	81-0687470	FL	
Centurion of Maryland, LLC	81-4938030	MD	
Centurion Detention Health Services, LLC	82-4735175	DE	
Centurion of New Hampshire, LLC	82-4823469	DE	
Centurion of Pennsylvania, LLC	82-4823469	PA	
Centurion of West Virginia, LLC		WV	
MHM Correctional Services, LLC (formerly a corporation)	54-1856340	DE	
MHM Services of California, LLC (formerly a corporation)	51-0620904	CA	
MHM Solutions, LLC (formerly a corporation)	60-0002002	DE	

Forensic Health Services, LLC. (formerly a corporation)	26-1877007	DE
MHM Health Professionals, LLC (formerly a corporation)	46-1734817	DE
Specialty Therapeutic Care Holdings, LLC	27-3617766	DE
Specialty Therapeutic Care, LP (99.99%)	73-1698808	TX
Specialty Therapeutic Care, GP, LLC	73-1698807	TX
Specialty Therapeutic Care, LP (0.01%)	73-1698808	TX
AcariaHealth Solutions, Inc.	80-0856383	DE
AcariaHealth, Inc.	45-2780334	DE
AcariaHealth Pharmacy #14, Inc	27-1599047	CA
AcariaHealth Pharmacy #11, Inc	20-8192615	TX
AcariaHealth Pharmacy #12, Inc	27-2765424	NY
AcariaHealth Pharmacy #13, Inc	26-0226900	CA
AcariaHealth Pharmacy, Inc	13-4262384	CA
HomeScripts.com, LLC	27-3707698	MI
New York Rx, Inc.	20-8235695	NY
Foundation Care, LLC (80%)	20-0873587	МО
U.S. Medical Management Holdings, Inc	27-0275614	DE
U.S. Medical Management, LLC (20%)	38-3153946	DE
U.S. Medical Management, LLC (80%)	38-3153946	DE
RMED, LLC	31-1733889	FL
IAH of Florida, LLC	47-2138680	FL
Heritage Home Hospice, LLC	51-0581762	MI
Grace Hospice of Austin, LLC	20-2827613	MI
ComfortBrook Hospice, LLC	20-1530070	ОН
Comfort Hospice of Texas, LLC	20-4996551	MI
Grace Hospice of San Antonio, LLC	20-2827526	MI
Grace Hospice of Grand Rapids, LLC	45-0679248	MI
Grace Hospice of Indiana, LLC	45-0634905	MI
Grace Hospice of Virginia, LLC	45-5080637	MI
Comfort Hospice of Missouri, LLC	45-5080567	MI
Grace Hospice of Wisconsin, LLC	46-1708834	MI
Grace Hospice of Illinois, LLC	81-5129923	IL
Seniorcorps Peninsula, LLC	26-4435532	VA
R&C Healthcare, LLC	33-1179031	TX
Pinnacle Senior Care of Missouri, LLC	46-0861469	MI
Country Style Health Care, LLC	03-0556422	TX
Phoenix Home Health Care, LLC	14-1878333	DE
Traditional Home Health Services, LLC	75-2635025	TX
Family Nurse Care, LLC	38-2751108	MI
Family Nurse Care II, LLC	20-5108540	MI
Family Nurse Care of Ohio, LLC	20-3920947	MI

Pinnacle Senior Care of Wisconsin, LLC	46-4229858	WI	
Pinnacle Senior Care of Indiana, LLC	81-1565426	MI	
Pinnacle Home Care, LLC	76-0713516	TX	
North Florida Health Services, Inc	59-3519060	FL	
Pinnacle Sr. Care of Kalamazoo, LLC	47-1742728	MI	
Hospice DME Company, LLC	46-1734288	MI	
Rapid Respiratory Services, LLC	20-4364776	DE	
USMM Accountable Care Partners, LLC	46-5735993	DE	
Pinnacle Senior Care of Illinois, LLC	83-3534462	IL	
VPA, P.C.	38-3176990	MI	
VPA of Texas	20-2386997	MI	
Health Net, LLC	47-5208076	DE	
Health Net of California, Inc.	95-4402957	CA	
Health Net Life Insurance Company	73-0654885	CA	66141
Health Net Life Reinsurance Company	98-0409907	CYM	
Managed Health Network, LLC	95-4117722	DE	
Managed Health Network	95-3817988	CA	
MHN Services, LLC	95-4146179	CA	
Health Net Federal Services, LLC	68-0214809	DE	
MHN Government Services LLC	42-1680916	DE	
MHN Global Services, Inc.	51-0589404	DE	
MHN Government Services-Guam, Inc.	90-0889803	DE	
MHN Government Services-International, Inc.	90-0889825	DE	
MHN Government Services-Puerto Rico, Inc.	90-0889815	DE	
Network Providers, LLC (10%)	88-0357895	DE	
Health Net Preferred Providers, LLC	61-1388903	DE	
Health Net Veterans, LLC	35-2490375	DE	
Network Providers, LLC (90%)	88-0357895	DE	
QualMed, Inc.	84-1175468	DE	
Health Net Health Plan of Oregon, Inc.	93-1004034	OR	95800
Health Net Community Solutions, Inc.	54-2174068	CA	
Health Net of Arizona, Inc.	36-3097810	AZ	95206
FH Assurance Company	98-0150604	CYM	
Health Net Pharmaceutical Services	68-0295375	CA	
Health Net of Arizona Administrative Services, Inc.	86-0660443	AZ	
Health Net Community Solutions of Arizona, Inc.	81-1348826	AZ	15895
Integrated Pharmacy Systems, Inc. (90%)	23-2789453	PA	
Health Net Access, Inc.	46-2616037	AZ	
MHS Consulting, International, Inc	20-8630006	DE	
PRIMEROSALUD, S.L.	Foreign	ESP	
MH Services International Holdings (UK) Limited	Foreign	GBR	

MH Services International (UK) Limited	Foreign	GBR	
Centene UK Ltd.	Foreign	GBR	
The Practice (Group) Limited	Foreign	GBR	
Villa Maria del Triuinfo Salud S.A. C. (5%)	Foreign	PER	
Callao Salud S.A.C.	Foreign	PER	
Centene Europe Finance Company Limited	Foreign	MLT	
Centene Health Plan Holdings, Inc.	82-1172163	DE	
Ambetter of North Carolina, Inc.	82-5032556	NC	16395
Carolina Complete Health Holding Company Partnership (80%)	82-2699483	DE	10393
Carolina Complete Health, Inc.	82-2699332	NC	16526
New York Quality Healthcare Corporation	82-3380290	NY	10320
Salus Administrative Services, Inc.	55-0878053	NY	
Salus IPA, LLC	82-0802846	NY	
Calibrate Acquisition Co	82-4670677	DE	
Community Medical Holdings Corp	47-4179393	DE	
Access Medical Acquisition, Inc.	46-3485489	DE	
Access Medical Group of North Miami Beach, Inc.	45-3191569	FL	
Access Medical Group of Miami, Inc.	45-3191719	FL	
Access Medical Group of Hialeah, Inc.	45-3192283	FL	
Access Medical Group of Westchester, Inc.	45-3199819	FL	
Access Medical Group of Opa-Locka, Inc.	45-3505196	FL	
Access Medical Group of Perrine, Inc.	45-3192955	FL	
Access Medical Group of Florida City, Inc.	45-3192366	FL	
Access Medical Group of Tampa, Inc.	82-1737078	FL	
Access Medical Group of Tampa, Inc. Access Medical Group of Tampa II, Inc.	82-1750978	FL	
Access Medical Group of Tampa III, Inc.	82-1773315	FL	
Access Medical Group of Lakeland, LLC	84-2750188	FL	
Interpreta Holdings,A Inc. (80.1%)	82-4883921	DE	
Interpreta, Inc.	46-5517858	DE	
Patriots Holding Co	82-4581788	DE	
RxAdvance Corporation (30.33%)	02-4001700	DE	
	22 2424506	DE	
Next Door Neighbors, LLC	32-2434596 83-2381790	DE	
Next Door Neighbors, Inc.	83-2446307	MI	16613
Centene Venture Company Michigan			
Centene Venture Company Illinois	83-2425735	IL KC	16505
Centene Venture Company Kansas	83-2409040	KS	16528
Centene Venture Company Florida	83-2434596	FL	16499
HealthEC, LLC (12.8%)	02 444446	MO	
Arch Personalized Medicine Initiative, LLC (50%)	83-4144116	MO	
Social Health Bridge, LLC	83-4205348	DE	
Social Health Bridge Trust	84-6403386	DE	

Wellington Merger Sub I, LLC		DE	
Wellington Merger Sub II, Inc.	83-4405939	DE	
QCA Healthplan, Inc.	71-0794605	AR	95448
Qualchoice Life and Health Insurance Company	71-0386640	AR	70998
Hudson Acquisition, LLC	83-3502610	TX	
HealthSmart Benefits Management, LLC	36-4099199	TX	
Parker LP, LLC	20-2387587	NV	
HealthSmart Preferred Care II, LP (99%)	75-2508316	TX	
HealthSmart Primary Care Clinics, LP (99%)	20-3394046	TX	
HealthSmart Care Management Solutions, LP (99%)	75-2960859	TX	
HealthSmart Information Systems, Inc.	75-2727437	TX	
HealthSmart Benefit Solutions, Inc.	36-4099199	IL	
HealthSmart Preferred Network II, Inc	06-1621470	DE	
HealthSmart Rx Solutions, Inc.	34-1635597	ОН	

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SCHEDULE Y PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)		Percentage	Entity(ies)/Person(s)	(Y/N)	*
	·					New York Stock				Shareholders/Board of	Shareholders/Boa		Shareholders/Board		
01295	Centene Corporation	00000 4	42-1406317		0001071739	Exchange	Centene Corporation	DE	UDP	Directors	rd of Directors	100.0	of Directors	N	0
							Bankers Reserve Life Insurance						Centene	ll	
01295	Centene Corporation	71013	39-0993433				Company of Wisconsin	WI	I A	Centene Corporation	Ownership	100.0	Corporation	N .	0
							Harlib Dian David Fatata			Bankers Reserve Life			0		
04005	Contana Consentian	00000	40 0000007				Health Plan Real Estate	MO	NILA	Insurance Company of	O	47.0	Centene		
01295	Centene Corporation	00000	46 - 2860967				. Holding, Inc.	JWU	NIA	Wisconsin	Ownership	17.0	Corporation	^r -	U
01295	Centene Corporation	12315	20-3174593				Peach State Health Plan. Inc	GA	LA	Centene Corporation	Ownership	100.0	Centene Corporation	l M	٥
01233	Centene corporation		20-0114000	-			Health Plan Real Estate	On		Centene corporation	. Owner strip	100.0	Centene		
01295	Centene Corporation	00000 4	46-2860967				Holding, Inc	MO	NIA	Peach State Health Plan, Inc.	Ownership	21.0	Corporation	v	0
01200			10 2000001				11014119, 1110		1	l odon otato noarth ran, mo.	1 0 WITHOUT OF THE PROPERTY OF		Centene		
01295	Centene Corporation	15713	46-4829006				lowa Total Care, Inc	I A	I A	Centene Corporation	Ownership	100.0	Corporat ion	N	0
	'	i i					Buckeye Community Health Plan,			İ '	' '		Centene	i i	
01295	Centene Corporation	11834 ;	32-0045282				Inc	OH	I A	Centene Corporation	Ownership	100.0	Corporation	N	0
							Health Plan Real Estate			Buckeye Community Health			Centene		
01295	Centene Corporation	00000 4	46-2860967				Holding, Inc	MO	NIA	Plan, Inc	Ownership	13.0	Corporation	Y	0
							l <u>-</u>						Centene	ll	
01295	Centene Corporation	12959	20 - 5693998				Absolute Total Care, Inc	SC	I A	Centene Corporation	.Ownership	100.0	Corporat ion	N	0
04005	Contana Consentian	00000	46-2860967				Health Plan Real Estate	MO	NILA	Absolute Tetal Cons. Inc.	O	1 10	Centene		
01295	Centene Corporation	00000	46-2860967				Holding, IncCoordinated Care Corporation	JWU	NIA	Absolute Total Care, Inc	Ownership	1.0	Corporation Centene	^Y -	l
01295	Centene Corporation	95831	39-1821211				_d/b/a Managed Health Services	IN	LA	Centene Corporation	Ownership.	100.0	Corporation	l M	٥
01233	l centene corporation		00-1021211				Health Plan Real Estate	IN		Health Plan Real Estate	. Owner strip	100.0	Centene		ا لا
01295	Centene Corporation	00000	46-2860967				Holding, Inc.	MO	NIA	Holding, Inc.	Ownership	15.0	Corporation.	l y	0
0.200							Healthy Washington Holdings,		1	l			Centene		
01295	Centene Corporation	00000 4	46 - 5523218				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporat ion	N	0
	·	i i		İ			Coordinated Care of Washington,			Coordinated Care of	' '		Centene		
01295	Centene Corporation	15352	46-2578279				Inc	WA		Washington, Inc	Ownership	100.0	Corporation		0
							Managed Health Services						Centene		
01295	Centene Corporation	96822	39-1678579				Insurance Corp	WI	I A	Centene Corporation	.Ownership	100.0	Corporat ion		0
04005	Contana Consentian	00000	46-2860967				Health Plan Real Estate	MO	NIA	Health Plan Real Estate	O	1	Centene		
01295	Centene Corporation	00000 4	40-2800907				Holding, Inc	JWIU	NIA	Holding, Inc	Ownership	2.0	Corporation Centene	^r -	U
01295	Centene Corporation	60078	86-0819817				Hallmark Life Insurance Co	AZ	I A	Centene Corporation	.Ownership	100.0	Corporation	l M	0
01295	Certene corporation		00-0019017				That illiark Life insurance co		I M	Certene corporation	. Owner Sirip	100.0	Centene	JN	
01295	Centene Corporation	95647	74-2770542				Superior HealthPlan, Inc	TX	IA	Centene Corporation	Ownership	100.0	Corporation	l N	n l
01200			7 1 2770012				Health Plan Real Estate		1	Contono corporation	. oo i o p		Centene	1	
01295	Centene Corporation	00000 4	46-2860967				Holding, Inc.	MO	NIA	Superior HealthPlan, Inc.	Ownership	21.0	Corporat ion	Υ	0
	'			1					1				Centene		1
01295	Centene Corporation	00000 2	27 - 0916294				.Healthy Louisiana Holdings LLC	DE	NIA	Centene Corporation	.Ownership	100.0	Corporat ion		0
							Louisiana Healthcare		1	Healthy Louisiana Holdings	<u></u>		Centene		İ
01295	Centene Corporation	13970	27 - 1287287				Connections, Inc	LA	I A	LLC	Ownership	100.0	Corporat ion	[N	0
04005	0	40000	00 0570040				Manage Line Hand the Dilance La		1.	0	O	100 0	Centene		_ [
01295	Centene Corporation	13923	20-8570212	1	-		Magnolia Health Plan Inc	MS	I A	Centene Corporation	.Ownership	1	Corporation	[N	l
01295	Centene Corporation	14053	27 - 2186150				 	11	IA	Centene Corporation	Ownership.	100.0	Centene Corporation	l N	_
01290	Toentene corboration	14000	Z1 -Z 100 100	.			.pririmoare nearth rian, IIIC	I L	I M	Logitteria corborationi	1 owner surb	100.0	Logi hoi at ioii"	N	U

SCHEDULE Y PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	,							,	,						
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	00000	46-2860967				Health Plan Real Estate Holding, Inc.	MO	NIA	IlliniCare Health Plan, Inc	Ownership	5.0	Centene Corporation	l v	0
01293	Centene Corporation	00000	40-2000907				. nording, inc	JVIU	N I A	TITTITICATE REALTH FIAH, IIIC	Ownership	J	Centene	'	
01295	Centene Corporation.	00000	26-0557093				Sunshine Health Holding LLC	FL	NIA	Centene Corporation	Ownership_	100.0		l N	0
													Centene		
01295	Centene Corporation	13148	20-8937577				Sunshine State Health Plan, Inc.	FL	I A	Sunshine Health Holding LLC	Ownership	100.0		N	0
24005			15 100 1005				Kentucky Spirit Health Plan,	107					Centene	l	
01295	Centene Corporation	14100	45-1294925				Inc	KY	I A	Centene Corporation	Ownership	100.0	Corporation Centene	N	0
01295	Centene Corporation	00000	45-5070230				Healthy Missouri Holding, Inc	MO	NIA	Centene Corporation	Ownership	95.0	Corporation.	l M	
01200	deritario corporation	00000	40-00/0200				Thearthy wrosourr norumg, me			Contone corporation	O#IIC13111P		Centene		
01295	Centene Corporation	14218	45-2798041				Home State Health Plan, Inc	MO		Healthy Missouri Holding, Inc	Ownership	100.0	Corporation	N	
	·						Health Plan Real Estate						Centene		
01295	Centene Corporation	00000	46-2860967				Holding, Inc	MO	NIA	Home State Health Plan, Inc	Ownership	5.0		Y	
01295	Contona Corneration	14345	4E 2276702				Sunflower State Health Plan,	KS	I A	Centene Corporation	Ownership	100 0	Centene	, I	
01293	Centene Corporation	14343	45-3276702				IIIC	No	I A	Centene Corporation	Ownership	100.0	Corporation Centene	IN	
01295	Centene Corporation	14226	45-4792498				Granite State Health Plan, Inc	NH	I A	Centene Corporation	Ownership	100.0		l N	
0.200	· ·						California Health and Wellness						Centene		
01295	Centene Corporation	00000	46-0907261				Plan	CA	NIA	Centene Corporation	Ownership	100.0		N	
04005		40700	00 0040400									400.0	Centene	١., ا	
01295	Centene Corporation	10769	30-0312489				Michigan Complete Health, Inc Western Sky Community Care.	MI	I A	Centene Corporation	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	16351	45-5583511				Inc.	NM	I.A	Centene Corporation	Ownership.	100.0	Corporation	l N	
01200	dentene corporation	10001	40 0000011				1110			Contone Corporation	0 #1101 0111 p	1	Centene		
01295	Centene Corporation	16143	20-4761189				SilverSummit Healthplan, Inc	NV		Centene Corporation	Ownership	100.0		N	
<u></u>	<u> </u>	l					l				.		Centene	ll	
01295	Centene Corporation	00000	22-3292245				University Health Plans, Inc	NJ	NIA	Centene Corporation	Ownership	100.0		N	
01295	Centene Corporation	00000	20-0483299				Agate Resources. Inc.	0R	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	l N	
01200	Contone Corporation	00000	20-0400200				Trillium Community Health Plan,	OI\		Contone corporation	0 #1101 3111 p	1100.0	Centene		
01295	Centene Corporation.	12559	42-1694349				Inc.	OR	I A	Agate Resources, Inc.	Ownership	100.0	Corporation	N	
													Centene		
01295	Centene Corporation	15902	47 - 5123293				Nebraska Total Care, Inc	NE	I A	Centene Corporation	Ownership	100 . 0	Corporation	N	
01295	Centene Corporation	16041	47 - 5340613				Pennsylvania Health & Wellness,	PA	I A	Centene Corporation	Ownership	100.0	Centene Corporation	l N	
01293	l centene corporation	10041	47 - 3340013				Superior HealthPlan Community	Г А	I A	Centene corporation	Ownership	100.0	Centene	IN	
01295	Centene Corporation	15912	47 - 5664832				Solutions. Inc.	TX	I A	Centene Corporation	Ownership	100.0	Corporation	N.	
	·						Sunshine Health Community			'	İ '		Centene		
01295	Centene Corporation	15927	47 - 5667095				Solutions, Inc.	FL	I A	Centene Corporation	Ownership	100.0		N	
04005	0	10440	47 5004040				Buckeye Health Plan Community	011	1.4	0	0	400 0	Centene		
01295	Centene Corporation	16112	47 - 5664342				Solutions, IncArkansas Health & Wellness	0H	I A	Centene Corporation	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	16130	81-1282251				Health Plan. Inc.	AR.	IA	Centene Corporation	Ownership	100.0		N	
5 1200	'		O. 1202201				Arkansas Total Care Holding			Arkansas Health & Wellness		1	Centene		
01295	Centene Corporation	00000	38-4042368				Company, LLC	DE	NIA	Health Plan, Inc	Ownership	49.0	Corporation	N	
0.405-		10055	00.0046					,_	ļ ,.	Arkansas Total Care Holding			Centene		
01295	Centene Corporation	16256	82-2649097	.			Arkansas Total Care, Inc	AR	I A	Company, LLC	Ownership	100.0	Corporation	[N	

SCHEDULE Y PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

											•				
1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
04005	Conton Connection	00000	04 0404507				Oldahama Camalata Haalth Laa	OV	NILA	Contant Consenting	O	100.0	Centene	ار	
01295	Centene Corporation	00000	81-3121527				Oklahoma Complete Health Inc	0K	NIA	Centene Corporation	.Ownership	100.0	Corporation Centene	[]] N	
01295	Centene Corporation	00000	20-4980875				Bridgeway Health Solutions, LLC.	DE.	NIA	Centene Corporation	Ownership	100.0		l N	
01233	Contone corporation	00000	20-4300013				Bridgeway Health Solutions of			Bridgeway Health Solutions,	. O willor 3111 p	100.0	Centene		
01295	Centene Corporation	16310	20-4980818				Arizona Inc	AZ	II A	LLC	Ownership	100.0		l N	
													Centene		
01295	Centene Corporation	00000	36-2979209				Celtic Group, Inc	DE	NIA	Centene Corporation	Ownership	100.0		N	
													Centene		
01295	Centene Corporation	80799	06-0641618				Celtic Insurance Company	IL	I A	Celtic Group, Inc	Ownership	100.0	Corporation	N .	
04005	040	45700	05 0505004				Aubakkan at Managalia Ina	MO	1.4	0.14:	Own a sala ta	400.0	Centene	١., ا	
01295	Centene Corporation	15762	35-2525384				Ambetter of Magnolia Inc	MS	I A	Celtic Insurance Company	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	15729	36-4802632				Ambetter of Peach State Inc.	GA	LA	Celtic Insurance Company	Ownership.	100.0	Corporation	l N	
01233	Centene Corporation	101 20	30-4002032				Ambetter of reach state me	Un	1	Certic mourance company	. Owner sirrp	100.0	Centene		
01295	Centene Corporation	00000	27 - 2221367				Novasys Health, Inc	DE	NIA	Celtic Group, Inc	Ownership	100.0	Corporation	l N	
							CeltiCare Health Plan Holdings						Centene		
01295	Centene Corporation	00000	26-4278205				LLC	DE	NIA	Celtic Group, Inc	Ownership	100.0	Corporation	N	
							CeltiCare Health Plan of			CeltiCare Health Plan			Centene		
01295	Centene Corporation	13632	26-4818440				Massachusetts, Inc	MA		Holdings LLC	Ownership	100.0		N .	
04005	Conton Connection	00000	20 4004072				Contana Managament Company II C	wı	NILA	Conton Connection	O	100.0	Centene	ا ا	
01295	Centene Corporation	00000	39-1864073				Centene Management Company LLC	WI	NIA	Centene CorporationCentene Management Company	.Ownership	100.0	Corporation Centene	IN	
01295	Centene Corporation	00000	20-0057283				CMC Real Estate Co. LLC	DE	NIA	III.C.	Ownership	100.0	Corporat ion	l N	
01200	Contone Corporation	00000	20 000/200				omo riodi Editato od: EEo		1		1 0 11101 0111 p		Centene		
01295	Centene Corporation	00000	26-4094682				Centene Center LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0		N	
											,		Centene		
01295	Centene Corporation	00000	82-1816153				Centene Center I, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0			
04005	0	00000	47 5450045				0	DE	NII A	OMO D 1 F. + - + - O 110	Own a sala ta	400.0	Centene	١., ا	
01295	Centene Corporation	00000	47 - 5156015				Centene Center II, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	82-3210933				Centene Center III, LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporation	l N	
01200	l dentene derperation	00000	02 0210000				Toomeno oomen iii, EEo		1	omo nour Estato oo. EEo	. O WITO TOTT P	100.0	Centene		
01295	Centene Corporation	00000	46-4234827				CMC Hanley, LLC	MO	NIA	CMC Real Estate Co. LLC	Ownership	100.0	Corporat ion	lN	
	i i												Centene		
01295	Centene Corporation	00000	45-5431787				GPT Acquisition LLC	DE	NIA	CMC Real Estate Co. LLC	Ownership	100.0			
0.4005			00.0704005				Illinois Health Practice	25		Centene Management Company		50.0	Centene	ll	
01295	Centene Corporation	00000	82-2761995				Alliance, LLC	DE	NIA	Contant Management Company	.Ownership	50.0	Corporat ion	N	
01295	Centene Corporation	00000	84-3023173				Integregated Care Network of Florida. LLC	DE	NIA	Centene Management Company	Ownership	100.0	Centene Corporation	l N	
0 1230	l centene corporation	00000	04 - JUZJ 11 J					ן⊐ע		LLV	1 041161 2111h	100.0	Centene	^{JN} -	
01295	Centene Corporation	00000	46-2798132				Lifeshare Management Group. LLC.	NH	NIA	Centene Corporation	Ownership	100.0		l N	
							Arkansas Total Care Holding]	Lifeshare Management Group,]		Centene		
01295	Centene Corporation	00000	38-4042368				Company, LLC	DE	NIA	LLC	Ownership	25.0		N	
							<u></u>						Centene		ļ
01295	Centene Corporation	00000	20-2074217				CCTX Holdings, LLC	DE	NIA	Centene Corporation	.Ownership	100.0	Corporat ion	N	
04205	Contant Consenting	00000	74 0040404				Contana Company of Toyor 15	TV	NILA	COTY Haldings IIIC	O	1 , ,	Centene		
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	ТХ	NIA	CCTX Holdings, LLC	.Ownership	JI.U	Corporation	[N]	

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1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
						Name of					Type of Control				
						Securities Exchange if			Relationship		(Ownership, Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N)	*
		0.000				,				(**************************************		- creamage	Centene	()	
01295	Centene Corporation	00000	20-2074277				Centene Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	
	·						-			·			Centene		
01295	Centene Corporation	00000	74-2810404				Centene Company of Texas, LP	TX	NIA	Centene Holdings, LLC	Ownership	99.0		N .	
0.400.5		00000	40 4705400				MUQ T					400.0	Centene	١, ا	
01295	Centene Corporation	. 00000	43 - 1795436				MHS Travel & Charter, Inc	WI	NIA	Centene Corporation	Ownership	100.0	Corporation		
01295	Centene Corporation	00000	46-4855483				Health Care Enterprises, LLC	DE	NIA	Centene Corporation	Ownership.	100.0	Centene Corporation	l N	
01233	Centene Corporation	. 00000	40-4000400				Integrated Mental Health	DL		Centene Corporation	Ownership	100.0	Centene	^{JN} -	
01295	Centene Corporation	00000	74-2892993				Management, L.L.C.	TX	NIA.	Centene Corporation	Ownership_	100 0	Corporation	l N	
							Integrated Mental Health			Integrated Mental Health			Centene		
01295	Centene Corporation	. 00000	74-2785494				Services	ТХ	NIA	Management, L.L.C	Ownership	100.0	Corporation	N	
	·												Centene		
01295	Centene Corporation	. 00000	22-3889471				Envolve Holdings, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporat ion		
04005	040	00000	68-0461584				Cenpatico Behavioral Health,	0.4	NII A	Forestern Hotel's and Ho	O	400.0	Centene	١., ا	
01295	Centene Corporation	. 00000	08-0401084				LLU	CA	NIA	Envolve Holdings, LLC Cenpatico Behavioral Health.	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	86-0782736				CBHSP Arizona. Inc	AZ	NIA	Turc beliavioral heartiff,	Ownership	100.0	Corporation	l N	
01233	Centene corporation		00-0702730				Const At 12011a, 1110	٨٧		Cenpatico Behavioral Health,	. Owner 3111 p	100.0	Centene		
01295	Centene Corporation	00000	47 - 2595704				Cenpatico of California, Inc	CA	NIA	LLC.	Ownership	100.0	Corporation	lN	
		i i					Cenpatico Behavioral Health of			Cenpatico Behavioral Health,			Centene		
01295	Centene Corporation	. 00000	20-1624120				Arizona, LLC	AZ	NIA	LLC	Ownership	100.0	Corporation		
		l					<u> </u>			Cenpatico Behavioral Health			Centene	ll	
01295	Centene Corporation	00000	80-0879942				Cenpatico of Arizona Inc	AZ	NIA	of Arizona, LLC	Ownership	100.0	Corporat ion	N	
01295	Centene Corporation	00000	37 - 1788565				Envolve, Inc	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	N	
01295	l centene corporation	. 00000	31 - 17 000000				Elivorve , Tilo	DE		Elivorve nordings, LLC	Ownership	100.0	Centene	JN	
01295	Centene Corporation	00000	47 - 3454898				Envolve - New York. Inc	NY	NIA	Envolve, Inc	Ownership	100 0	Corporation	l N	
0.200			0.0.000										Centene		
01295	Centene Corporation	. 00000	06-1476380				Envolve PeopleCare, Inc	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Corporat ion	N	
		l					l			<u></u>			Centene	ll	
01295	Centene Corporation	00000	47 - 2516714				LiveHealthier, Inc	DE	NIA	Envolve PeopleCare, Inc	Ownership	100.0	Corporat ion	N	
01295	Centene Corporation	00000	61-1846191				Envolve Benefits Options, Inc	DE	NIA	Envolve Holdings, LLC	Ownership	100.0	Centene Corporation	l M	
01295	l centene corporation	. 00000	01-1040191				Envolve benefits options, inc	DE	JN I A	Envolve Benefits Options.	ownership	100.0	Centene	JN	
01295	Centene Corporation	00000	20-4730341				Envolve Vision Benefits, Inc	DE	NIA	Inc	Ownership	100.0		l N	
01200	Contone Corporation		20 17 000 11				Envolve Captive Insurance			1110	0 11101 0111 p		Centene		
01295	Centene Corporation	00000	36-4520004				Company, Inc.	SC	NIA	Envolve Vision Benefits, Inc.,	Ownership	100.0	Corporation	N	
	<u> </u>									<u></u>	l		Centene		
01295	Centene Corporation	95302	75-2592153				Envolve Vision of Texas, Inc	ТХ	I A	Envolve Vision Benefits, Inc.	Ownership	100.0		N	
04205	Contono Cornoretias	00000	20 4772000				Envolve Vision 1	DE.	NI A	Envolve Vision Perefite I.:	Ownersh:-	400.0	Centene		
01295	Centene Corporation	. 00000	20-4773088				Envolve Vision, Inc Envolve Vision IPA of New York.	DE	NIA	Envolve Vision Benefits, Inc.	Ownersiiip	100.0	Corporation Centene	JN	
01295	Centene Corporation	00000	83-2460878				Inc	NY	NIA	Envolve Vision Benefits, Inc.,	Ownership	100.0	Corporation	N	
0.200	001 por ac ron		2 2 10001 0							2			Centene		
01295	Centene Corporation	00000	65-0094759				Envolve Vision of Florida, Inc	FL	NIA	Envolve Vision Benefits, Inc.,	Ownership	100.0	Corporation	lN	

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									10	1			1		
1	2	3	4	5	6	7 Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities					(Ownership,				
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	, ID	Federal	0114	Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	_
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	
01295	Centene Corporation	00000	20-4861241				Envolve Total Vision. Inc.	DE	NIA	Envolve Vision Benefits, Inc.	Ownershin	100.0	Centene Corporation	l N	
01200	Contone corporation	00000	20 4001241				Liverve retail vision, mo.		1	Liverye vision benefits, me.	0 W1101 3111 P	100.0	Centene	'	
01295	Centene Corporation	00000	82-2908582				Envolve Optical, Inc	DE	NIA	Envolve Vision Benefits, Inc.	Ownership	100.0	Corporation	N	
	·						·			Envolve Benefits Options,	·		Centene	l i	
01295	Centene Corporation	00000	46-2783884				Envolve Dental, Inc	DE	NIA	Inc	Ownership	100.0	Corporation	N .	
04205	Centene Corporation	00000	81-2969330				 Envolve Dental of Florida. Inc.	FL	NIA	Envolve Dental, Inc	Ownership.	100.0	Centene	ابرا	
01295	Centene Corporation	00000	01-2909330				Envolve Dental of Florida, Inc.	Г.	NIA	Envoive Dentar, Inc	ownership	100.0	Corporation Centene		
01295	Centene Corporation	16106	81-2796896				Envolve Dental of Texas, Inc	TX	IA	Envolve Dental, Inc.	Ownership.	100.0	Corporation	l N	
							Envolve Dental IPA of New York,				- · · · · · · · · · · · · · · · · · · ·		Centene		
01295	Centene Corporation	00000	83-1464482				Inc	NY	NIA	Envolve Dental, Inc	Ownership	100.0	Corporation	N	
24005			77 0570500				Envolve Pharmacy Solutions,	25					Centene	L. I	
01295	Centene Corporation	00000	77 -0578529				Inc	DE	NIA	Envolve Holdings, LLCEnvolve Pharmacy Solutions,	Ownership	100.0		N	
01295	Centene Corporation	00000	76-0511700				LBB Industries. Inc.	TX	NIA	Inc.	Ownership	100 0	Centene Corporation	l N	
01200	Contone Corporation	00000	70-0311700				TEDD THOUSETTOS, THO	/ /		Envolve Pharmacy Solutions,	0 will of 3111 p	100.0	Centene		
01295	Centene Corporation	00000	75-2612875				RX Direct, Inc	TX	NIA	Inc	Ownership	100.0	Corporation	N	
	i i									Envolve Pharmacy Solutions,	'		Centene		
01295	Centene Corporation	00000	46 - 2307356				Envolve Pharmacy IPA, LLC	NY	NIA	Inc	Ownership	100.0		N .	
04005	Conton Connection	00000	90-0636938				Casenet LLC	DE	NIA	Contana Consentina	O	100 0	Centene	l ,,	
01295	Centene Corporation	00000	90-0030930				l casellet LLC	 	NTA	Centene Corporation	Ownership	100.0	Corporation Centene]JN	
01295	Centene Corporation	00000					Casenet S.R.O.	CZE	NIA	Casenet LLC	Ownership	100.0	Corporation	l N	
	']		, , , , , , , , , , , , , , , , , , , ,		Centene		
01295	Centene Corporation	00000	82-5316510				MHM Services, Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporation		
04005	0	00000	00 0700500				0	DF	NII A	MIM Occursor Land	Own and bit	400.0	Centene	١ ا	
01295	Centene Corporation	00000	90-0766502				Centurion LLC	DE	NIA	MHM Services, Inc	Ownership	100.0	Corporation Centene	IN	
01295	Centene Corporation	00000	81-4228054				Centurion of Arizona. LLC	AZ	NIA	Centurion LLC	Ownership	100.0	Corporat ion	l N	
0.200							00.11.01.01.01.120.10, 220	,	1				Centene		
01295	Centene Corporation	00000	47 - 1686283				Centurion of Vermont, LLC	VT	NIA	Centurion LLC	Ownership	100.0	Corporation	N	
04005	Conton Connection	00000	47 - 2967381				Continuing of Minainsiani IIIC	MC	NII A	Contunion IIC	O	100 0	Centene	l ,,	
01295	Centene Corporation	00000	47 - 290/381				Centurion of Mississippi, LLC	MS	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	JN	
01295	Centene Corporation	00000	30-0752651				Centurion of Tennessee. LLC	TN	NIA	Centurion LLC.	Ownership	100.0	Corporat ion	l N	
0.200							2011101101101101100000, 2201111111		1	2011(411611 = 20111111111111111111111111111111111			Centene		
01295	Centene Corporation	00000	46-2717814				Centurion of Minnesota, LLC	MN	NIA	Centurion LLC	Ownership	100.0	Corporation	N	
04005		00000	04 4404400				Centurion Correctional				0 1:	400.0	Centene	ا, ا	
01295	Centene Corporation	00000	81-1161492				Healthcare of New Mexico, LLC	NM	NIA	Centurion LLC	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	81-0687470				Centurion of Florida. LLC	FL	NIA	Centurion LLC.	Ownership	100.0		l N	
0 1200	Sometime to the state of the st						Joseph Granding Element		1	55	σοι οιτι μ		Centene		
01295	Centene Corporation	00000	81-4938030				Centurion of Maryland, LLC	MD	NIA	Centurion LLC	Ownership	100.0	Corporation	N	
04005			00 4705475				Centurion Detention Health	55				400 0	Centene		
01295	Centene Corporation	00000	82 - 4735175	·			Services, LLC	DE	NIA	Centurion LLC	Ownership	1	Corporation Centene	[N	
01295	Centene Corporation	00000	82-4823469				 Centurion of New Hampshire, LLC.	DE	NIA	Centurion LLC	Ownership	100 0	Corporation	N	
0 1200	Positiono our por at ron	00000	02 7020700				Containon of Now Hampsiille, LLO.		↓	OOTTUT TOTT LEO	ominor sirrp		1 001 por at 1011	[

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Names of Parent. Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)		Entity(ies)/Person(s)	(Y/N)	*
04005	Contant Consenting	00000	00 4000400				Contunion of Bonney Lyonia LLC	D.	ALL A	Canturian IIIC	O	100.0	Centene	ا ا	
01295	Centene Corporation	00000	82-4823469				Centurion of Pennsylvania, LLC	PA	NIA	Centurion LLC	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000					Centurion of West Virginia, LLC.	<u>W</u> V	NIA	Centurion LLC	Ownership	100.0		N	
0.4005		00000	54 4050040				MHM Correctional Services, LLC	DE.				400.0	Centene		
01295	Centene Corporation	00000	54 - 1856340				(formerly a corporation) MHM Services of California, LLC	DE	NIA	MHM Services, Inc	.Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	51-0620904				(formerly a corporation)	CA	NIA	MHM Services, Inc	Ownership	100.0		N	
0.4005	l						MHM Solutions, LLC (formerly a	25	l			400.0	Centene	ll	
01295	Centene Corporation	00000	60-0002002				corporation)Forensic Health Services, LLC.	DE	NIA	MHM Services, Inc.	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	26-1877007				(formerly a corporation)	DE	NIA	MHM Services. Inc	Ownership	100.0		l N	
	'						MHM Health Professionals, LLC				'		Centene		
01295	Centene Corporation	00000	46 - 1734817				(formerly a corporation)	DE	NIA	MHM Services, Inc	.Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	27 - 3617766				Specialty Therapeutic Care Holdings, LLC	DE	NIA	Centene Corporation	Ownership.	100.0	Corporation	l N	
0.200							,go,			Specialty Therapeutic Care			Centene		
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	ТХ	NIA	Holdings, LLC	Ownership	100.0			
01295	Centene Corporation	00000	73-1698807				Specialty Therapeutic Care, GP,	ТХ	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership	100.0	Centene Corporation	l N	
01200	Octrono Gorporation	00000								Specialty Therapeutic Care.	0 #1101 0111 p		Centene		
01295	Centene Corporation	00000	73-1698808				Specialty Therapeutic Care, LP	TX	NIA	IGP. LLC.	.Ownership	0.0	Corporat ion	N	
01295	Centene Corporation	00000	80-0856383				AcariaHealth Solutions, Inc	DE	NIA	Specialty Therapeutic Care Holdings, LLC	Ownership.	100.0	Centene Corporation	l N	
01200	Contone corporation	00000					Theat ranearth conditions, me	DL		Specialty Therapeutic Care	0 #11G1 3111 p	100.0	Centene		
01295	Centene Corporation	00000	45-2780334				AcariaHealth, Inc	DE	NIA	Holdings, LLC	Ownership	100.0			
01295	Centene Corporation	00000	27 - 1599047				AcariaHealth Pharmacy #14, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Centene Corporation	l N	
01293	Centene Corporation	00000	21 - 1399041				Acarranearth Fhamilacy #14, Thc		N I M	Acarranearth, mc	. Owner Sirip	100.0	Centene		
01295	Centene Corporation	00000	20-8192615				AcariaHealth Pharmacy #11, Inc	ТХ	NIA	AcariaHealth, Inc	Ownership	100.0		N	
01295	Centene Corporation	00000	27 - 2765424				 AcariaHealth Pharmacy #12, Inc	NY	NIA	AcariaHealth, Inc.	Ownership	100.0	Centene Corporation	l N	
01295	Centene Corporation	00000	21 -21 03424				Acarranearth Fhamilacy #12, Thc	J\\ !	NI /\	Acarraneartii, iiic	. Owner Sirip	100.0	Centene	JJN	
01295	Centene Corporation	00000	26-0226900				AcariaHealth Pharmacy #13, Inc	CA	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N	
01205	Contana Corneration	00000	13-4262384				Association the Dharmany Inc	CA	NIA	Acarialla of the line	Ownorabin	100.0	Centene		
01295	Centene Corporation	00000	13-4202304				AcariaHealth Pharmacy, Inc		N I A	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	27 - 3707698				HomeScripts.com, LLC	MI	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation	N	
04005	0	00000	00 0005005				Nam Vanl. Dec. Lan	AIV/	NII A	Association (About the	O	400.0	Centene		
01295	Centene Corporation	00000	20-8235695				New York Rx, Inc.	NY	NIA	AcariaHealth, Inc	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	20-0873587				Foundation Care, LLC	MO	NIA	AcariaHealth, Inc	Ownership	80.0		N	
0.4005							U.S. Medical Management	25	l			400.0	Centene		
01295	Centene Corporation	00000	27 - 0275614				Holdings, Inc	DE	NIA	Centene CorporationU.S. Medical Management	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	38-3153946				U.S. Medical Management, LLC	DE	NIA	Holdings, Inc	Ownership	20.0	Corporation	N	
	·						,				,		Centene		
01295	Centene Corporation	00000	38-3153946	.			U.S. Medical Management, LLC	DE	NIA	Centene Corporation	Ownership	80.0	Corporation	JN	

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1	2	3	4	5	6	/ Name of	8	9	10	11	12 Type of Control	13	14	15	16
						Securities					(Ownership,			ll	
		NAIC				Exchange if	Names of		Relationship to		Board,	If Control is Ownership		Is an SCA Filing	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Parent. Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Provide	Ultimate Controlling		
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage		(Y/N)	*
0.400.5			0.4. 4700000				DUED					400.0	Centene		
01295	Centene Corporation	00000	31-1733889				RMED, LLC	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	. N .	
01295	Centene Corporation	00000	47-2138680				IAH of Florida. LLC	FL	NIA	RMED. LLC	Ownership	100.0		l N	
	,									,	, , , , , , , , , , , , , , , , , , , ,		Centene		
01295	Centene Corporation	00000	51-0581762				Heritage Home Hospice, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0			
01295	Centene Corporation.	00000	20-2827613				Grace Hospice of Austin, LLC	MI	NIA	U.S. Medical Management, LLC	Ownershin	100.0	Centene Corporation	l N	
01200	ourrone desperation						Torado ricoproco or macerni, Ezo			l	'		Centene		
01295	Centene Corporation	00000	20-1530070				ComfortBrook Hospice, LLC	OH	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	N.	
01295	Centene Corporation	00000	20-4996551				Comfort Hospice of Texas, LLC	MI	NIA	U.S. Medical Management, LLC	Ownerchin	100.0	Centene Corporation	l N	
01200	deritaria derperativon	00000	20-4000001				Grace Hospice of San Antonio,			0.0. mearear management, EEo	O#IIO13111P		Centene		
01295	Centene Corporation	00000	20-2827526				LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0			
01295	Centene Corporation	00000	45-0679248				Grace Hospice of Grand Rapids,	MI	NIA	U.S. Medical Management, LLC	Ownorchin	100 0	Centene Corporation	l N	
01295	centene corporation	00000	43-00/9240				LLO	JW I	NTA	0.5. Medicai management, LLc	Owner Strip	100.0	Centene		
01295	Centene Corporation	00000	45-0634905				Grace Hospice of Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	N	
04005	0	00000	45 5000007				Occasi Hanaitan af Windinia 110		NII A	III O Madii aal Maaaaaaaa II O	0	400 0	Centene		
01295	Centene Corporation	00000	45-5080637				Grace Hospice of Virginia, LLC Comfort Hospice of Missouri,	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	. N .	
01295	Centene Corporation	00000	45-5080567				LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	N .	
0.4005		00000	40 4700004									400.0	Centene		
01295	Centene Corporation	00000	46 - 1708834				Grace Hospice of Wisconsin, LLC.	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	81-5129923				Grace Hospice of Illinois, LLC	IL	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	lN.	
	'						İ '				, i	İ	Centene		
01295	Centene Corporation	00000	26 - 4435532				Seniorcorps Peninsula, LLC	VA	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation Centene	. N .	
01295	Centene Corporation	00000	33-1179031				R&C Healthcare, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	l N	
							Pinnacle Senior Care of				, i		Centene		
01295	Centene Corporation	00000	46-0861469				Missouri, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000	03-0556422				Country Style Health Care, LLC	TX	NIA	U.S. Medical Management, LLC	Ownership	100 0	Centene Corporation	l N	
0.200	00.110.10 00. por at 10.									Į , , ,	,		Centene		
01295	Centene Corporation	00000	14-1878333				Phoenix Home Health Care, LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	. N .	
01295	Centene Corporation.	00000	75-2635025				Traditional Home Health Services. LLC	TX	NIA	U.S. Medical Management, LLC	Ownershin	100 0	Centene Corporation	N	
01200	contene corporation	00000	7 0 - 2000020				Joer Vices, ELO	/ /		0.0. mearear management, ELO	0 will of 3111 p		Centene		
01295	Centene Corporation	00000	38-2751108				Family Nurse Care, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	N	
01295	Centene Corporation	00000	20-5108540				Family Nurse Care II, LLC	MI	NIA	U.S. Medical Management, LLC	Ownorchin	100.0	Centene Corporation	l N	
01230	Containe Componation	00000	ZU - J 100040				Training Nurse Cale II, LLC			0.0. mourcar manayement, LLC	041101 2111h	100.0	Centene		
01295	Centene Corporation	00000	20-3920947				Family Nurse Care of Ohio, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion		
01205	Contone Corneration	00000	46-4229858				Pinnacle Senior Care of	l wı	NIA	III & Madical Management III	Ownership	100.0	Centene	, ,	
01295	Centene Corporation	00000	40-4229000				Wisconsin, LLCPinnacle Senior Care of	WI	NIA	U.S. Medical Management, LLC	ownersitip	100.0	Corporation Centene		
01295	Centene Corporation	00000	81-1565426				Indiana, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporat ion	N .	

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
		NAIG				Exchange if	Names of		Relationship		Board,	If Control is		Is an SCA	
Group		NAIC Company	ID	Federal		Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domiciliary	to Reporting	Directly Controlled by	Management, Attorney-in-Fact,	Ownership Provide	Ultimate Controlling	Filing Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	00000	76-0713516				Pinnacle Home Care. LLC	TX	NIA	U.S. Medical Management, LLC	Ownershin	100.0	Centene Corporation	l N	
01200	Contone corporation						North Florida Health Services,				·	100.0	Centene		
01295	Centene Corporation	. 00000	59-3519060				Inc	FL	NIA	U.S. Medical Management, LLC	Ownership	100.0		N	
01295	Centene Corporation	. 00000	47 - 1742728				Pinnacle Sr. Care of Kalamazoo,	MI	NIA	U.S. Medical Management, LLC	Ownershin	100.0	Centene Corporation	l N	
01233		. 000000	47 - 17 427 20							0.0. mourear management, ELO	0 #1101 3111 p	100.0	Centene		
01295	Centene Corporation	. 00000	46-1734288				Hospice DME Company, LLC	MI	NIA	U.S. Medical Management, LLC	Ownership	100.0		N	
01295	Centene Corporation	. 00000	20-4364776				Rapid Respiratory Services, LLC	DE	NIA	U.S. Medical Management, LLC	Ownershin	100.0	Centene Corporation	l N	
01233	Contone corporation			-			USMM Accountable Care Partners.	DL			'	100.0	Centene		
01295	Centene Corporation	. 00000	46-5735993				LLC	DE	NIA	U.S. Medical Management, LLC	Ownership	100.0	Corporation	N	
01295	Centene Corporation	. 00000	83-3534462				Pinnacle Senior Care of	IL	NIA	U.S. Medical Management, LLC	Ownerchin	100.0	Centene Corporation	l N	
01233	Centene corporation	. 000000	00-0004402							0.5. meurcar management, LLo	Owner 3111p	100.0	Centene		
01295	Centene Corporation	. 00000	38-3176990				VPA, P.C	MI	NIA	Centene Corporation	Ownership	100.0	Corporation	N	
01295	Centene Corporation	. 00000	20-2386997				VPA of Texas	M1	NIA	Centene Corporation	Ownership	100.0	Centene Corporation	l N	
01293	Centene Corporation	. 00000	20-2300997				VFA 01 16xd5	JWI I	N I A	Centene Corporation	ownersinp	100.0	Centene	IN	
01295	Centene Corporation	. 00000	47 - 5208076				Health Net, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	
01295	Centene Corporation	. 00000	95-4402957				Health Net of California, Inc	CA	NIA	Health Net, LLC	Ownership	100.0	Centene Corporation	l "	
01293	Centene Corporation	. 00000	90-4402937				Health Net Life Insurance	UA	NI //	Health Net of California.	Owner Sirrp	100.0	Centene	J	
01295	Centene Corporation	66141	73-0654885				Company	CA	I A	Inc	Ownership	100.0	Corporation	N	
01295	Centene Corporation	. 00000	98-0409907				Health Net Life Reinsurance	CYM	NIA	Health Net of California,	Ownership	100.0	Centene Corporation		
01293	Centene Corporation	. 00000	90-0409907				Company		N I A	1110	Ownership	100.0	Centene	IN	
01295	Centene Corporation	. 00000	95-4117722				Managed Health Network, LLC	DE	NIA	Health Net, LLC	Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000	95-3817988				Managed Health Network	CA	NIA	 Managed Health Network, LLC	Ownership	100.0	Centene Corporation	l "	
01293	Centene Corporation	. 00000	90-3017900				Manageu Hearth Network		NIA	wanaged hearth wetwork, LLC	ownersinp	100.0	Centene	IN	
01295	Centene Corporation	. 00000	95-4146179	.			MHN Services, LLC	CA	NIA	Managed Health Network, LLC	Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000	68-0214809				Health Net Federal Services,	DE	NIA	Health Net. LLC	Ownership	100.0	Centene Corporation	l N	
01293	Centene corporation	. 000000	00-02 14009				LLO	DL		Health Net Federal Services.	Owner Sirip	100.0	Centene	JJN	
01295	Centene Corporation	. 00000	42-1680916				MHN Government Services LLC	DE	NIA	LLC	Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000	51-0589404				MHN Global Services. Inc.	DE	NIA	MHN Government Services LLC	Ownership.	100.0	Centene Corporation	l "	
01293	Centene Corporation	. 00000	31-0309404				IMHN Government Services-Guam.		JN I A	I MININ GOVERNMENT SERVICES ELC	ownersinp	100.0	Centene	IN	
01295	Centene Corporation	. 00000	90-0889803				Inc	DE	NIA	MHN Government Services LLC	Ownership	100.0		N	
01205	Contono Corporation	00000	90-0889825				MHN Government Services-	DE	NIA	MHN Government Services LLC	Ownership	100.0	Centene	, , ,	
01295	Centene Corporation	. 00000	30-00030Z0				International, Inc MHN Government Services-Puerto	DE	N I A	minin government services LLC	Ownership	100.0	Corporation Centene	J	
01295	Centene Corporation	. 00000	90-0889815				Rico, Inc.	DE	NIA	MHN Government Services LLC	Ownership	100.0	Corporation	N	
01205	Contone Corneration	00000	88-0357895				Notwork Providers 110	חר	NII A	MIN Coverament Corvince II.C	Ownership	10.0	Centene	.	
01295	Centene Corporation	. 00000	00 - U33/ 893				Network Providers, LLC Health Net Preferred Providers.	DE	NIA	MHN Government Services LLC Health Net Federal Services.	Ownership	10.0	Corporation Centene	N	
01295	Centene Corporation	. 00000	61-1388903				LLC	DE	NIA	LLC	Ownership	100.0	Corporation	N	

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1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership,	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01205	Contona Corneration	00000	35-2490375				Health Net Veterans. LLC	DE	NIA	Health Net Federal Services,	Ownership	100 0	Centene Corporation		
01295	Centene Corporation	00000	33-24903/3				Thearth Net Veterans, LLC	DE	N I A	LLC Health Net Federal Services.	Ownership	100.0	Centene		
01295	Centene Corporation	00000	88 - 0357895				Network Providers, LLC	DE	NIA	IIIC	Ownership.	90.0	Corporation	l N	
01200	contono corporation	00000	00 000/000				110000010 110010010, 220				0 1110 1 0111 p		Centene	1	
01295	Centene Corporation	00000	84-1175468				QualMed, Inc	DE	NIA	Health Net, LLC	Ownership	100.0	Corporation	lN.	
	·						Health Net Health Plan of				·		Centene		
01295	Centene Corporation	95800	93-1004034				Oregon, Inc.	OR	A	QualMed, Inc	Ownership	100.0	Corporation	N .	
04005	Contana Connection	00000	E4 0474000				Health Net Community Solutions,	CA	NII A	Haalah Nat II C	O	100 0	Centene	الما	
01295	Centene Corporation	00000	54-2174068				Inc.		NIA	Health Net, LLC	Ownership	100.0	Corporation Centene	^N -	
01295	Centene Corporation	95206	36-3097810				Health Net of Arizona. Inc	AZ	I A	Health Net, LLC	Ownership	100 0	Corporat ion	N	
01200	contone corporation	30200	00-0007010				Thearth Net of Arrzona, me			linearth Not, LLo	Owner 3111 p	1	Centene		
01295	Centene Corporation	00000	98-0150604				FH Assurance Company	CYM	NIA	Health Net, LLC	Ownership	100.0		l	
İ	·			l			Health Net Pharmaceutical				i i		Centene		
01295	Centene Corporation	00000	68-0295375				Services.	CA	NIA	Health Net, LLC	Ownership	100.0	Corporation	N .	
0.4005		00000	00 0000440				Health Net of Arizona	4.7				400.0	Centene	ll	
01295	Centene Corporation	00000	86-0660443				Administrative Services, Inc	AZ	NIA	Health Net, LLC	Ownership	100.0	Corporation	N .	
01295	Centene Corporation	15895	81-1348826				Health Net Community Solutions of Arizona. Inc.	AZ	I A	Health Net. LLC	Ownership	100 0	Centene Corporation	l M	
01233	centene corporation	10000	01-1040020				Integrated Pharmacy Systems,	∧∠			Ownersinp	1100.0	Centene	IN -	
01295	Centene Corporation	00000	23-2789453				Inc.	PA	NIA	Health Net, LLC	Ownership.	90.0	Corporation	l	
	'									ĺ	'	İ	Centene		
01295	Centene Corporation	00000	46 - 26 16 037				Health Net Access, Inc	AZ	NIA	Health Net, LLC	Ownership	100.0		N .	
0.4005							MHS Consulting, International,	25					Centene	ll	
01295	Centene Corporation	00000	20-8630006				Inc	DE	NIA	Centene Corporation	Ownership	100.0	Corporat ion	N .	
01295	Centene Corporation	00000					PRIMEROSALUD. S.L	ESP	NIA	MHS Consulting, International, Inc	Ownership	100 0	Centene Corporation	l M	
01233	centene corporation	00000					MH Services International	L0I		MHS Consulting.	Owner 3111 P	1100.0	Centene	IN -	
01295	Centene Corporation	00000		ll			Holdings (UK) Limited	GBR	NIA	International, Inc.	Ownership.	100.0	Corporation	l	
	'			İ			MH Servicès International (UK)			MH Services International	'		Centene		
01295	Centene Corporation	00000					Limited	GBR	NIA	Holdings (UK) Limited	Ownership	100.0		N .	
04005	0	00000					04	ADD.	NII A	MH Services International	Owner and his	400.0	Centene		
01295	Centene Corporation	00000					Centene UK Ltd.	GBR	NIA	(UK) Limited MH Services International	Ownership	100.0	Corporation Centene	^N -	
01295	Centene Corporation	00000					The Practice (Group) Limited	GBR	NIA	(UK) Limited	Ownership	100 0	Corporation	l N	
0 1200	Contono Corporation	00000					Villa Maria del Triuinfo Salud			MHS Consulting.	0 milot 3111 p		Centene	IN	
01295	Centene Corporation	00000					S.A. C.	PER	NIA	International, Inc	Ownership	5.0	Corporat ion	N	
	·									MHS Consulting,	·		Centene		İ
01295	Centene Corporation	00000					Callao Salud S.A.C.	PER	NIA	International, Inc	Ownership	100.0	Corporation	N .	
04005	Contone Consonting	00000					Centene Europe Finance Company	мт	NII A	MHS Consulting,	O	100.0	Centene		
01295	Centene Corporation	00000					Limited Centene Health Plan Holdings.	MLT	NIA	International, Inc	Ownership	100.0	Corporation Centene	[N	
01295	Centene Corporation	00000	82-1172163				Inc.	DE	NIA	Centene Corporation	Ownership	100 0	Corporation	l N	
01200	Contone Corporation	00000	02 11/2100				Ambetter of North Carolina.			Centene Health Plan Holdings.	o milor offip		Centene		
01295	Centene Corporation	16395	82-5032556				Inc	NC	I A	Inc	Ownership	100.0	Corporation	N	
	·				ļ		Carolina Complete Health			Centene Health Plan Holdings,			Centene		į
01295	Centene Corporation	00000	82-2699483				Holding Company Partnership	DE	NIA	Inc	Ownership	0.08	Corporation	[N .	

1	2	3	4	5	6	7 Name of Securities	8	9	10	11	12 Type of Control (Ownership.	13	14	15	16
						Exchange if			Relationship		Board,	If Control is		Is an SCA	
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
04005	0	40500	00.000000				Occasión Complete Haglaha II.	NO	1.4	Carolina Complete Health	O	400.0	Centene	١., ا	
01295	Centene Corporation	16526	82-2699332				Carolina Complete Health, Inc	NC	I A	Holding Company Partnership	Ownership	100.0	Corporation	N	
01295	Centene Corporation	00000	82-3380290				New York Quality Healthcare Corporation	NY	NIA	Centene Corporation	Ownership.	100.0	Centene Corporation	l M	
01295	Centene corporation	00000	02-3300290	-			Salus Administrative Services.	JN1	N I A	New York Quality Healthcare	. Ownersinp	100.0	Centene	^J \	
01295	Centene Corporation	00000	55-0878053				Inc.	NY	NIA	Corporation	Ownership	100.0	Corporation	l N	
01200	Contone corporation	00000	00 00/0000				1110			Salus Administrative	0 #1101 5111 p	100.0	Centene		
01295	Centene Corporation.	00000	82-0802846				Salus IPA, LLC	NY	NIA	Services, Inc.	Ownership	100.0	Corporation	lN	
							,						Centene		
01295	Centene Corporation	00000	82-4670677				Calibrate Acquisition Co	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	
							·						Centene		
01295	Centene Corporation	00000	47 - 4179393				Community Medical Holdings Corp.	DE	NIA	Calibrate Acquisition Co	Ownership	100.0			
0.4005		00000	40.0405400				Access Medical Acquisition,	DE		Community Medical Holdings		400.0	Centene	١, ا	
01295	Centene Corporation	00000	46 - 3485489				IncAccess Medical Group of North	DE	NIA	CorpAccess Medical Acquisition.	Ownership	100.0	Corporation		
01295	Centene Corporation	00000	45-3191569				Miami Beach. Inc.	FI	NIA	Inc.	Ownership	100.0	Centene Corporation	l N	
01295	Centene corporation	00000	43-3191309				Access Medical Group of Miami,	J L	N I A	Access Medical Acquisition,	. Ownerstrip	100.0	Centene	^{JN} -	
01295	Centene Corporation	00000	45-3191719				Inc	FL	NIA	Inc	Ownership	100.0		l N	
01200	Contone corporation	00000	40 01011 10	1			Access Medical Group of		1	Access Medical Acquisition,	. o #1101 5111 p		Centene		
01295	Centene Corporation	00000	45-3192283				Hialeah, Inc.	FL	NIA	Inc.	Ownership	100.0	Corporation	lN	
							Access Medical Group of			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	45-3199819				Westchester, Inc	FL	NIA	Inc	Ownership	100.0	Corporat ion		
							Access Medical Group of Opa-			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	45-3505196				Locka, Inc.	FL	NIA	Inc	Ownership	100.0		N .	
04005	Contana Connection	00000	45-3192955				Access Medical Group of	FL	NII A	Access Medical Acquisition,	O	100.0	Centene	ار	
01295	Centene Corporation	00000	45-3192955				Perrine, IncAccess Medical Group of Florida	FL	NIA	Access Medical Acquisition,	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	45-3192366				City, Inc	FL	NIA	Inc	Ownership	100.0	Corporation	l N	
01233	Contone Corporation	00000	40-0102000				Access Medical Group of Tampa,			Access Medical Acquisition.	. Owner 3111p	100.0	Centene		
01295	Centene Corporation	00000	82-1737078				Inc.	FL	NIA	Inc.	Ownership	100.0	Corporat ion	lN	
	'						Access Medical Group of Tampa			Access Medical Acquisition,			Centene		
01295	Centene Corporation	00000	82-1750978					FL	NIA	Inc	Ownership	100.0	Corporation	N	
							Access Medical Group of Tampa			Access Medical Acquisition,			Centene	ll	
01295	Centene Corporation	00000	82-1773315					FL	NIA	Inc.	Ownership	100.0		N .	
04005	0	00000	04 0750400				Access Medical Group of	-	NII A	Access Medical Acquisition,	O	400.0	Centene	١., ا	
01295	Centene Corporation	00000	84-2750188				Lakeland, LLC	FL	NIA	Inc	Ownership	100.0	Corporation Centene		
01295	Centene Corporation	00000	82-4883921				Interpreta Holdings, Inc.	DE	NIA	Centene Corporation	Ownership.	80.1	Corporation	l N	
01233	Contone Corporation	00000	02-4000021				I miterpreta noramga, me	DL		Contone corporation	. Owner 3111p		Centene		
01295	Centene Corporation	00000	46-5517858				Interpreta, Inc.	DE	NIA	Interpreta Holdings, Inc.	Ownership	100.0		l N	
]]				Centene		
01295	Centene Corporation	00000	82-4581788				Patriots Holding Co	DE	NIA	Centene Corporation	Ownership	100.0	Corporation	N	
									1				Centene		
01295	Centene Corporation	00000					RxAdvance Corporation	DE	NIA	Patriots Holding Co	Ownership	30.3		N	
04005		00000	00 0404500				lu , p , u , u , u ,	55	l			400.0	Centene	l .l	
01295	Centene Corporation	00000	32-2434596	-			Next Door Neighbors, LLC	DE	NIA	Centene Corporation	Ownership	100.0		N	
01205	Contono Corporation	00000	83-2381790				Novt Door Noighborn Inc	DE	NIA	Novt Door Noighbara 110	Ownership	100.0	Centene	N.	
01295	Centene Corporation	J UUUUU	03-2301/90	.			Next Door Neighbors, Inc	I ΓΕ	N I A	Next Door Neighbors, LLC	Ownership	JIUU.U	Corporation	[N]	

					•				1 10	1 44			T		
1	2	3	4	5	6	7 Name of Securities Exchange if	8	9	10 Relationship	11	12 Type of Control (Ownership, Board,	13 If Control is	14	15 Is an SCA	16
		NAIC				Publicly	Names of		to		Management,	Ownership		Filing	
Group		Company	ID	Federal		Traded (U.S. or	Parent, Subsidiaries	Domiciliary	Reporting	Directly Controlled by	Attorney-in-Fact,	Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	Number	RSSD	CIK	International)	or Affiliates	Location	Entity	(Name of Entity/Person)	Influence, Other)	Percentage	Entity(ies)/Person(s)	(Y/N)	*
01295	Centene Corporation	16613	83-2446307				Centene Venture Company Michigan	MI	I.A	Next Door Neighbors, Inc	Ownership	100 0	Centene Corporation	l N	
01200	deritario derperatiron	10010	00 2440007				Centene Venture Company			Noxt boot Norghbors, mo	0 WITO TOTT P		Centene		
01295	Centene Corporation	16505	83-2425735					IL		Next Door Neighbors, Inc	Ownership	100.0	Corporation	N	
										l.,			Centene		
01295	Centene Corporation	16528	83-2409040				Centene Venture Company Kansas	KS	I A	Next Door Neighbors, Inc	Ownership	100.0	Corporat ion	N	
01295	Centene Corporation	16499	83-2434596				Centene Venture Company Florida.	FL	I A	Next Door Neighbors, Inc.	Ownership	100 0	Centene Corporation	l N	
01233	l centene corporation	10433	03-2434330				t deritene venture company i for fua	J L		Next boot Nergibors, inc	Ownersinp	100.0	Centene		
01295	Centene Corporation	00000					HealthEC, LLC		NIA	Centene Corporation	Ownership	12.8	Corporat ion	N	
							Arch Personalized Medicine						Centene		
01295	Centene Corporation	00000	83-4144116				Initiative, LLC	MO	NIA	Centene Corporation	Ownership	50.0	Corporat ion	N	
01295	Centene Corporation	00000	83-4205348				Social Health Bridge, LLC	DE	NIA	Centene Corporation	Ownership	100 0	Centene Corporation	l M	
01200	deritana derperatiron	00000	03-4200040				Ocerar ricartii Briage, ELO	DL		Contone corporation	0 will of 3111 p	100.0	Centene		
01295	Centene Corporation	00000	84-6403386				Social Health Bridge Trust	DE	NIA	Centene Corporation	Ownership	100.0	Corporat ion	N	
													Centene]	
01295	Centene Corporation	00000					Wellington Merger Sub I, LLC	DE	NIA	Centene Corporation	Ownership	100.0	Corporat ion	N	
01295	Centene Corporation	00000	83-4405939				 Wellington Merger Sub II, Inc	DE	NIA	Centene Corporation	Ownership	100 0	Centene Corporation	l N	
01200	deritario der per at ron	00000	00-4400000				merrington merger oub ir, inc	DL		Contone Corporation	Owner3111p	100.0	Centene		
01295	Centene Corporation	95448	71-0794605				QCA Healthplan, Inc	AR	I A	Centene Corporation	Ownership	100.0	Corporat ion	N	
0.4005		70000	74 0000040				Qualchoice Life and Health					400.0	Centene	ا ا	
01295	Centene Corporation	70998	71-0386640				Insurance Company	AR	I A	Centene Corporation	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	83-3502610				Hudson Acquisition. LLC	TX	NIA	Centene Corporation	Ownership	100 0	Corporation	l N	
0 1200	dentend corporation						HealthSmart Benefits]	contone corporation	0 1110 1 0111 p		Centene		
01295	Centene Corporation	00000	36-4099199				Management, LLC	TX	N I A	Hudson Acquisition, LLC	Ownership	100.0	Corporation	N	
0.4005		00000	00 0007507					ADV.		HealthSmart Benefits		400.0	Centene		
01295	Centene Corporation	00000	20-2387587				Parker LP, LLC HealthSmart Preferred Care II.	NV	NIA	Management, LLC	Ownership	100.0	Corporation Centene	N	
01295	Centene Corporation	00000	75-2508316				IIP	TX	NIA	Parker LP, LLC	Ownership	99 0	Corporation	l N	
0.200	00110110 001 por at 1011						HealthSmart Primary Care				0 11101 0111 p		Centene		
01295	Centene Corporation	00000	20-3394046				Clinics, LP	TX	NIA	Parker LP, LLC	Ownership	99.0	Corporat ion	N	
0.4005		00000	75 0000050				HealthSmart Care Management	TX				00.0	Centene	ا., ا	
01295	Centene Corporation	00000	75-2960859				Solutions, LP HealthSmart Information	X	NIA	Parker LP, LLC HealthSmart Benefits	Ownership	99.0	Corporation Centene	N	
01295	Centene Corporation	00000	75-2727437				Systems. Inc.	TX	NIA	Management, LLC	Ownership.	100 0	Corporation	l N	
	30. 20. 30.						HealthSmart Benefit Solutions,			HealthSmart Benefits			Centene		
01295	Centene Corporation	00000	36-4099199				Inc	IL	NIA	Management, LLC	Ownership	100.0	Corporation]N	
04005	0	00000	00 4004470				HealthSmart Preferred Network	DE	NI A	HealthSmart Benefits	0	400.0	Centene		
01295	Centene Corporation	00000	06 - 1621470					DE	NIA	Management, LLC HealthSmart Preferred Network	Ownership	1100.0	Corporation Centene	N	
01295	Centene Corporation	00000	34-1635597				HealthSmart Rx Solutions. Inc	0H	NIA	III. Inc	Ownership	100 0	Corporation	l N	
							l sorations, mo								
							1								

Asterisk	Explanation
0000001	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
Explanation:	
Bar Code:	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate 2 Prior Year Ended Year To Date December 31 Book/adjusted carrying value, December 31 of prior year . Cost of acquired: 0 0 2.1 Actual cost at time of acquisition.....

2.2 Additional investment made after acquisition 0 ..0 Current year change in encumbrances.
Total gain (loss) on disposals..... 0 Deduct amounts received on disposals

Total foreign exchange change in book/adjusted carrying value. 5. 0 ..0 Deduct current year's other-than-temporary impairment recognized 0. 8. 9. 0 0.. 0 .0 0 10. Deduct total nonadmitted amounts. Statement value at end of current period (Line 9 minus Line 10) 0

SCHEDULE B - VERIFICATION

	Mortgage Loans		
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		0
	2.2 Additional investment made after acquisition		()
3.	Capitalized deferred interest and other		0
4.	Accrual of discount		L0
5.	Capitalized deferred interest and other. Accrual of discount. Unrealized valuation increase (decrease). Total gain (loss) on disposals. Deduct amounts received on disposals.		L0
6.	Total gain (loss) on disposals		0
7.	Deduct amounts received on disposals		0
8.	Deduct amortization of premium and mortgage interest points and commitment fees		0
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		0
10.	Deduct current year's other-than-temporary impairment recognized		0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-		
	8+9-10)	0	0
12.	Total valuation allowance		0
13.	Subtotal (Line 11 plus Line 12)	0	0
14.	Deduct total nonadmitted amounts	0	0
15.	Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets		
-	1	2
		Prior Year Ended
	Year To Date	December 31
Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other.		L0
4. Accrual of discount		L0
2.2 Additional investment made after acquisition 3. Capitalized deferred interest and other		L0
6. Total gain (loss) on disposals		L0
7. Deduct amounts received on disposals		L0
8. Deduct amortization of premium and depreciation		10
Total foreign exchange change in book/adjusted carrying value		0
Deduct current year's other-than-temporary impairment recognized		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	I0
12. Deduct total nonadmitted amounts.	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	T 0	0

SCHEDULE D - VERIFICATION

	Bonds and Stocks	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	24,322,102	20,098,653
2.	Cost of bonds and stocks acquired	1,552,573	17,258,546
3.	Accrual of discount		22,004
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals.		[(136,270)]
6.	Deduct consideration for bonds and stocks disposed of	24,322,102	12,872,804
7.	Deduct consideration for bonds and stocks disposed of	146	50,888
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other-than-temporary impairment recognized Total investment income recognized as a result of prepayment penalties and/or acceleration fees		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		2,861
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	1,552,427	24,322,102
12.	Deduct total nonadmitted amounts	<u>0</u>	L0
13.	Statement value at end of current period (Line 11 minus Line 12)	1,552,427	24,322,102

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE QualChoice Life and Health Insurance Company, Inc.

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	1,612,436	1,452,573	1,616,000	3,418	1,608,872	1,612,436	1,452,427	21,342,319
2. NAIC 2 (a)	1	200,000			1	1	200,000	2,979,784
3. NAIC 3 (a)	0				0	0	0	0
4. NAIC 4 (a)	0				0	0	0	0
5. NAIC 5 (a)	0				0	0	0	0
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	1,612,436	1,652,573	1,616,000	3,418	1,608,872	1,612,436	1,652,427	24,322,103
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0		0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	1,612,436	1,652,573	1,616,000	3,418	1,608,872	1,612,436	1,652,427	24,322,103

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$	
--	--

NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE QualChoice Life and Health Insurance Company, Inc.

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
					Paid for Accrued
	Book/Adjusted			Interest Collected	Interest
	Carrying Value	Par Value	Actual Cost	Year To Date	Year To Date
9199999		XXX			

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
Book/adjusted carrying value, December 31 of prior year	0	2 , 186 , 184
Cost of short-term investments acquired	1,608,872	1 ,636 , 192
3. Accrual of discount	7 , 128	27,624
Unrealized valuation increase (decrease)		0
5. Total gain (loss) on disposals		0
Deduct consideration received on disposals	1,616,000	3,850,000
7. Deduct amortization of premium		0
Total foreign exchange change in book/adjusted carrying value		0
Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule DB - Part A - Verification NONE

Schedule DB - Part B - Verification NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification NONE

SCHEDULE E - PART 2 - VERIFICATION (Cash Equivalents)

		1 Year To Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	40,200	1,680,693
1	Cost of cash equivalents acquired		
1	Accrual of discount		
4.	Unrealized valuation increase (decrease)		0
I	Total gain (loss) on disposals.		
6.	Deduct consideration received on disposals	23,042,123	3,259,505
7.	Deduct amortization of premium		0
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	6,841,321	40,200
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	6,841,321	40,200

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances								
1	2	3	4	5		Balance at End of		9
		Rate of	Amount of Interest Received During Current	Amount of Interest Accrued at Current Statement	6	During Current Q 7	8	_
Depository	Code	Interest	Quarter	Date	First Month	Second Month	Third Month	*
Open Depositories				T	7 774 557	0.000.707	0.000.040	LVVV
Arvest	+	 			/,/1/4,55/ // // // // // // // // // // // // //	3 070 851	7 813 650	XXX
Wells Fargo					15.052.842	3,928,737 3,070,851 9,101,019	3.447.427	XXX
0199998 Deposits in	XXX	XXX						XXX
0199999 Total Open Depositories	XXX	ХХХ	0	0	27,229,874	16,100,607	14,243,898	XXX
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	 	 						1
	†	t						1
		<u> </u>						1
0399999 Total Cash on Deposit	XXX	XXX	0	0	27,229,874	16,100,607	14,243,898	
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999 Total	XXX	ХХХ	0	0	27,229,874	16,100,607	14,243,898	XXX

STATEMENT AS OF SEPTEMBER 30, 2019 OF THE QualChoice Life and Health Insurance Company, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter									
1	2	3	4	5	6	7	8	9	
			Date	Rate of	Maturity	Book/Adjusted	Amount of Interest	Amount Received	
CUSIP	Description	Code	Acquired	Interest	Date	Carrying Value	Due & Accrued	During Year	
Bonds - U.S. Special	nds - U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions - Issuer Obligation						•	-	
	PHILADELPHIA PA ARPT REV TAXABLE IAM COM.		08/22/2019	2.150		100,000	233		
	U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations	of Agencies and Au	ithorities of Gover	nments and Their Political Subdiv	isions - Issuer				
Obligat						100,000	233	0	
3199999 - Bonds -	U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations IIs – Special Revenue and Special Assessment Obligations and all Non-Guaranteed of Agencies	of Agencies and Au	ithorities of Gover	nments and Their Political Subdiv	isions -				
		and Authorities of	Governments and I	heir Political Subdivisions		100,000	233	0	
	Total Bonds - Subtotals - Issuer Obligations					100,000	233	0	
	Total Bonds - Subtotals - Bonds					100,000	233	0	
All Other Money Marke			00/00/00/0		VVV	5 050 000 1	47.000 [
	FEDERATED GOVT OBL PRMR		09/09/2019	1.820	XXX	5,059,986	17,988	450	
	INVESCO GOV&AGENCY INST		09/30/2019	1.780	XXX	1,681,335	1/1		
8699999 - All Othe	r Money Market Mutual Funds		ı			6,741,321	18,159	458	
						·····			
						·····			
					•				
							·····		
8899999 Total Cas	sh Equivalents					6,841,321	18,392	458	